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EDITORIAL COMMENT

THE EPIDEMIC OF INFLUENZA

As we close our pages, Spanish Influenza is rampant in the United States and, according to the statements given out by the public press, it has now reached practically every state in the Union. Never within the recollection of people living today has there been an epidemic so wide-spread or so disastrous in its results.

Beginning in New England, and centering in military camps about Boston, it spread rapidly along the Atlantic seaboard and more slowly made its way westward. The initial symptoms of this dread disease are similar to those of a severe type of grippe, and in the more serious cases it develops into pneumonia, many times with fatal outcome.

While this epidemic has been alarmingly prevalent in our training camps, it has also reached people in their own homes not only in the cities and towns but it has even spread into the rural districts. In one such neighborhood with which we are familiar, a soldier home on a furlough developed it, and his little sister who attended the district school came down with it in a very malignant form and died. There is now scarcely a family in that district which hasn't at least one member sick with it, and in one home the mother and six children are in bed, and one child has already died.

We were in Washington recently while the Enrollment Emergency Station and the Emergency Hospital were being put into shape, (described in the Red Cross pages in this number), and we saw both these places in operation,—each a most efficient piece of executive work inaugurated by Miss Delano and her associates in the Department of Nursing under the Red Cross.

Appeals for help, especially for nurses, were being received from the camps in every section of the country by the Red Cross as well as by the officers of the Surgeon Generals of the Army and of the Navy. While the number of those available was altogether inadequate to meet the needs of this unprecedented situation, the response of the rank and file of the great nursing body was so splendid that we now

have an enlarged vision of the courage, the self-sacrificing spirit and the true womanliness of nurses. When the final reckoning is made we think it will be found that among no other group have the fatalities been greater, exposure and extreme fatigue being predisposing causes.

In Washington, the stress was so great that a public appeal was made to graduate nurses, undergraduates, practical nurses, nurses' aids, teachers, and any one who had had any sort of nursing experience at all. As one worker expressed it, "The call is for any one who has a pair of hands and is willing to help where the need is greatest," and so urgent were these calls that no time could be spent in investigating the character of those who responded. The same course has been followed in our own city, for like every other nursing center in the country, the nursing service is at present below the normal because so many of our women are now in military service, and because so many had been sent to New England before the outbreak of the epidemic here.

Thousands of women who have attended the courses in Elementary Hygiene and Home Care of the Sick given at different points in this country under the auspices of the Red Cross undoubtedly have helped to alleviate the suffering in their own homes, but having been led to believe by the ruling of the Surgeon General's office that they would not be needed for military service, comparatively few of those who were free, we fear, have been available in response to the call of the Red Cross for help in this crisis. Many of them are now enrolled in other branches of war work, such as the canteen service at home and abroad, the Motor Corps division, and the Y. W. C. A. and so are lost for the special work for which these classes prepared them,—that of assistants to nurses in civil or military hospitals.

The military nursing school with its 500 pupils scattered through the camps has, of course, been a help, but it has in no sense met the situation. The trained body, although so absolutely inadequate in numbers, has been the only force surely to be depended upon in this great crisis.

We quote from three letters received from scattered points in New England to show what the situation has been there:

Report
The situation here is very bad, we are doing all we can to meet it but cannot begin to do so. We are having about fifty calls a day and are able to care for a few of them. With the aid of the visiting nurses, we are able to see that more are having some care, but we are refusing calls for private nurses at the rate of about forty a day. To add to the seriousness of the situation, the hospitals are crowded to the doors. One of them has, at the present time, 511 patients, and 45 of its nurses are off duty, several being on the dangerous list. Another, which would ordinarily have 45 nurses on duty, has 15. The nurses are all doing

nobly, I cannot say enough in praise of the way they have responded to the calls till they fall victims, themselves. There are very few who are not giving their best, yet some doctors and others seem to feel that the nurses are dodging their duty. We are using volunteers, I do not know what we should do without them.

The influenza epidemic hit our station rather hard. The medical officer of the school, his assistant, three instructors, 300 of the boys from the school and I, did duty at the hospital for three weeks. It would be impossible to relate all the sad and terrible scenes.

There were friends from all parts of the country to be looked after and some of them, even, developed the disease. Our medical officer told me that never in his life did he feel so much like throwing up everything as he did one night after finishing his duty as officer of the day, which means twenty-four hours straight duty, subject to call at night. All night long he was witnessing death scenes, seeing weeping relatives and trying to take care of emergencies. I was on duty in the nurses' pavilion. Nearly all the nurses living there were taken sick. Four weeks ago, four nurses were too sick to go on duty and each day one or more would drop out. They transferred the up nurses to other quarters and used the pavilion for women's cases. We cleared the living room and placed six cots there for yeowomen. One by one the help succumbed and for two weeks we depended entirely upon sailors for all the work but the actual nursing. One little nurse passed out with meningitis. Another one's life has been hanging in the balance for a week. Several boys from the school died, two of the doctors and a carpenter, a civil employee who had been on duty at the hospital for a number of years. Conditions are clearing now.

I wonder whether you would like to hear regarding the work of the nurses here during this dreadful epidemic. It makes us wonder how there ever could have been any opposition to the passage of the Army Nurse bill. For real staunchness of purpose and fidelity to duty through the most trying circumstances, and for anywhere from twelve to eighteen hours of duty daily, I have never even imagined their equal, and I am glad to say that the best nurses have not all gone to France. I feel also free to say that I do not believe any hospital in France had anything on this Base Hospital during the last two weeks. You will be glad to know that the epidemic has abated to a considerable extent. I am enclosing a slip of paper that was handed around from the Commanding Officer. This man never for one moment lost his head or his spirit or his appreciation of the work that is being done. This station feels exceedingly fortunate in having him as Commanding Officer.

"Memorandum to be read to the officers, nurses, student nurses and soldiers on duty at this Base Hospital:

"As the epidemic of grippe and pneumonia seems to be subsiding, I want to take this opportunity to extend to the officers, nurses, student nurses and soldiers of this command my appreciation of the splendid way in which they all responded to the extremely heavy strain that has been placed upon them during the past three weeks. The cooperation, self sacrifice and untiring efforts of the members of this command are worthy of the highest praise. May the relatives of these nurses and soldiers who lost their lives as a result of pneumonia incurred in the discharge of their duty obtain some solace from this fact."

STATE MEETINGS POSTPONED

The state meetings of Massachusetts and of New York have been postponed because of the epidemic of influenza that is raging everywhere, New York having chosen December 4 and 5 as its new dates. Doubtless other meetings have met the same fate, as all nurses are bending their energies in caring for the sick or in taking the places of those who have fallen from the ranks through illness.

RED CROSS MEMBERSHIP

Nurses must not forget that they are citizens and that, as such, they should support the Red Cross by placing themselves on its records as members. In the early days of the nursing service it was felt that enrollment in the Nursing Service of the Red Cross made them members also of the organization itself without the payment of the small membership fee of \$1. It was found that this policy led to much confusion, and it is now requested that every nurse be a Red Cross member, while for Home Defense nurses, membership in the nearest Red Cross chapter is absolutely compulsory. It is evident that this is not always understood, for the question, "Are you a member of the Red Cross?" is often left unanswered.

In December, the second membership campaign of the Red Cross will be held, with universal membership as its objective. Would you like to see every man, woman and child in this country a loyal, supporting member of this great organization? If so, do your part by joining without delay, or by paying your dues for the coming year, if you are already a member.

CARE FOR NURSES TAKEN BY THE ENEMY

It will be a comfort to families of nurses who are serving abroad to know that, pending similar action by Congress, the Red Cross has announced that it will provide nurses who may be captured by the enemy, with food and clothing and, if necessary, with money for living expenses.

REPORT OF RED CROSS ENROLLMENT

A report issued by the Nursing Department of the Red Cross on September 1, regarding the campaign for enrollment last June, is exceedingly interesting, though too extensive to be given in full. It will be remembered that each state was given a quota to be raised, according to its number of nurses available as shown by the survey of last year. In estimating the percentage of returns, the number of nurses already in service has been credited to the state. The following is a summary by states of the result of the campaign:

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*Percentage Toward Securing Quota of 27,000 Nurses
September 1, 1918*

Colorado—100% (Over)	Ohio—48%
Maryland—100% (Over)	District of Columbia—47%
California—97%	Nebraska—46%
Illinois—97%	Michigan—44%
Missouri—95%	Utah—43%
Washington—94%	Montana—42%
North Dakota—91%	Arkansas—41%
Idaho—83%	Connecticut—41%
Virginia—80%	New Jersey—41%
Iowa—76%	Texas—36%
Wisconsin—74%	Maine—35%
Minnesota—73%	Rhode Island—33%
Pennsylvania—72%	Kansas—33%
Kentucky—63%	Oklahoma—33%
South Dakota—61%	Florida—33%
Louisiana—60%	Alabama—29%
Indiana—60%	New Hampshire—27%
Tennessee—57%	Vermont—27%
Massachusetts—56%	Delaware—21%
New York—55%	West Virginia—19%
Oregon—54%	Mississippi—18%
Wyoming—51%	North Carolina—15%
Georgia—51%	South Carolina—15%

THE INTERSTATE SECRETARY

The prevailing influenza has interfered with the plans of the Interstate Secretary, or of others for her, so that she must begin anew to make her winter's itinerary. For this reason we beg all state officers to consider whether she has been used sufficiently in their states and, if not, to make plans for her coming.

It is not necessary to have a state meeting in order to get the most good from her visit. Indeed, though she is a most helpful addition to the programme of a state meeting, and though that is a good way for her to begin her work in a state, she does not reach nearly so many nurses, nor help so many, as when she goes through the state, visiting the cities and towns, spending a day or two in each, speaking to or holding conferences with different groups of people.

The fact that Miss Eldredge has been a private duty nurse, a training school instructor and a public health nurse gives her an insight into many kinds of problems, and wherever she goes word comes back to this office of the value of her presence.

When a state is planning for her visit, one person should be made responsible for working out the details of her trip, since this can be done more advantageously by one familiar with the needs of the communities within the state and also with the routes of travel. First she should find out where the Interstate Secretary is wanted. She may have a form letter sent to each training school or organization in the state, suggesting that Miss Eldredge can speak to leagues, to groups of private duty nurses, to senior nurses, to alumnae or graduate nurse associations, to high school girls or to boards of managers. She should not be asked to speak more than twice a day, certainly not more than three times.

When the replies are in, the trip can be arranged in such a way that she need not retrace her steps. If short journeys are made, the expense of a sleeper need not be incurred. Where no systematic plan has been made in a state and her going has been haphazard, there is not only wear and tear of her strength, but waste of time and money.

The person arranging the trip should keep in touch with Miss Eldredge or, in her absence from her headquarters, with the JOURNAL office, so that some one may know, all the time, where she is expected and for how long. Definite information should be given as to hours of arrival and departure and the plan of entertainment, whether she is to stay at a hotel or with some hostess. The expense of traveling and of entertainment are not great if divided among all the places visited, and the value received is far greater than the expenditure, as we know from the enthusiastic comments that come to us from the places where she has been.

THE NURSES' RELIEF FUND

One of our department editors writes us that a nurse she knows, who is leaving shortly for service overseas, is making her insurance payable to the Nurses' Relief Fund, as she has only one near relative, and he does not need it. She thinks it possible that there are other nurses who would do the same, if the matter were brought to their attention. We know of some who turn over to this fund any money which comes to them undeservedly, as they think. There are others who have remembered it in their wills.

Month by month we find recorded under Nursing News the gradual growth of the Relief Fund. The amounts paid out do not equal the amounts which come in, and so it gradually creeps ahead, and though still far from the sum we hope to see it attain, there is enough to give a little here and a little there to help a nurse over a hard place when she is ill and unable wholly to meet her expenses. It

is not a loan fund, but those who have been helped by it in the past, often bend their efforts, later, in the direction of interesting nurses and associations in it, so that there may be more contributions to sustain it. For instance, one nurse who has been greatly handicapped for several years and who is at last able to assist in a central directory for nurses, found that the Relief Fund was unknown there and immediately sent in a request for pledge cards to distribute.

The aim of the committee in charge of the fund has always been to have each member of each nursing association give one dollar a year to it,—a very small sum for each donor, but a great amount for the fund, if all should subscribe. The amount given in each association by its members should be sent in one sum by its treasurer, or by its Relief Fund representative, to either the state or national treasurer, to lighten a little the work of the latter, for it is easier to acknowledge one sum from an association than many small contributions. Better the scattered small sums, however, than none at all, and no complaints are ever heard from Mrs. Twiss for the work involved in keeping the books of the Relief Fund, she feels it so well worth while.

ANOTHER UNIVERSITY OPENS A COURSE FOR NURSES

The University of Chicago, in coöperation with the Children's Memorial Hospital which is affiliated with it, will offer this fall, and again in the spring, a three months' course for student nurses. The subjects to be covered are: Chemistry, Dietetics, Anatomy, Physiology, Pharmacology, Materia Medica, Bacteriology, Hygiene and Pathology. There is a tuition fee of \$60 for the course, and it may be taken by college women, whether or not they intend to enter nursing.

We hope the experiment may prove so successful that it may be the beginning of a central preliminary course open to the students of all the nursing schools of the city.

TRAINING OF HOSPITAL ASSISTANTS

At the meeting of the American Hospital Association, held recently in Atlantic City, there was a very animated discussion between members of that association and representatives of the Red Cross and of the Army School in regard to the training of hospital assistants. It was definitely decided to give a six months' course of training to women of certain qualifications to be used as assistants in hospitals, both civil and military. At this time the Red Cross is working out, with a committee from the American Hospital Association, a definite plan for the training of such a group. Already Miss Good-

rich's plans for the training of hospital assistants in the military schools are being announced by the Council of Defense.

Those of our readers who are not subscribers to the *Modern Hospital* and who are specially interested to have the report of the Atlantic City meeting, should obtain a copy of the October number of that magazine, the address of which is 58 East Washington Street, Chicago. This report contains papers and discussions of vital importance to the nursing body and is a valuable contribution to the nursing history of the day.

OBITUARY RESOLUTIONS

We must, remind our readers, from time to time, that the JOURNAL does not publish formal resolutions adopted by associations on the death of any of their members. We do publish death notices, giving such facts about the life of the nurse as are most important and sometimes an appreciation of her work or character.

It is quite right that associations should express themselves formally when their ranks are thinned by death. Doubtless these resolutions are a comfort to the friends of the nurse who has gone, and they form a valued part of the records of the association. They do not, however, give a good idea of the nurse to the general reader. A death notice is shorter and yet tells more. If we published all the resolutions that come to us, pages would be occupied by them, yet very little information would be given. It is better to place the resolution on the records and to send to the JOURNAL a death notice, instead.

THE JOURNAL INDEX

Copies of the index and the title page for Volume XVIII of the JOURNAL may be had, without charge, upon request, from the JOURNAL office.

IN SUNNY FRANCE

BY LAURA HARTWELL, R.N.

Base Hospital No. 47, France

To have studied French in New York, and learned that the correct answer to "*Comment allez vous?*" (How are you?) is "*Tres bien*" (Very good), makes it rather disconcerting to be met with the reply "Good-bye!" from various French children, when one is anxious to exercise her French. Whether the pronunciation is at fault, or the children are craving to use their slight knowledge of English, we have yet to learn, but facts are stubborn things, and it looks as though the attempted greetings are to blame.

The children walk beside us and slip their little hands into ours, darling girls and sturdy boys, not showing the signs of famine we expected to see, although there is a wistful look on some of their faces, and several are fatherless. One little boy we spoke to the other day was a born optimist, and believed in looking forward to the future pleasures of his young life.

"Is there any place where we can buy cake?" we asked.

"No cake," he replied, "but after the war, then cake," which seems to be the spirit over here. Victory is certain. It is only a question of time.

General Pershing and his staff visited our hospital during his tour of inspection. We all hurried on duty one hour earlier the day he was expected, to have everything ready for him, but there was some delay, and he did not appear for three or four days. However, when he did arrive, we were all delighted to see him, he looked so strong and dependable. He visited some of the wards and talked to the men, also shook hands with several of the nurses, and thanked them for coming over to take care of his men. After the distinguished party had left, one or two patients were anxious to shake hands with those nurses! Reflected glory, I suppose. Some of the patients rushed to the windows overlooking the courtyard, to see the General depart, and there was little Jean, the mascot of the hospital force, waiting to salute him. The General returned the salute, and then picked Jean up, and kissed him on each cheek, in true French fashion, which the boy will probably appreciate more in later years. Jean is a fair, curly-headed boy of five, and loves the corps men better than he loves the nurses. He has learned a little English, and will drill three or four of the men when they are off duty. It pleases him to hold a United States flag in his chubby right hand while giving the order, "March!" "Fall in!" or "Right about face!" and then have them

salute the flag as they pass. The boys taught him this ceremony on July the fourth, and they are all very fond of him. When the nurses came they washed him and bought him new clothing, but this only brought them an occasional smile, while he makes real companions of the men.

These events all happened in an interesting old town quite a long way behind the lines, where the hospital was established in old stone buildings, some of them dating from the sixteenth century. Each stone seemed to hold a history, but the rooms soon assumed a modern air when the beds were made up and plumbing installed. One wonders if the ancient fathers who used to inhabit our old monastery, would think the reason for the nurses' presence there, sufficient for such a feminine invasion.

It must be the desire for privacy or retirement which leads the French people to hide their gardens away in the center of their homes, for almost all the larger houses are built in the form of a square, with a courtyard in the center. Even the modern *Hotel* in the old town had adopted this style, although in this case the yard was paved, and the flowers were on the four walls surrounding it. The building was three stories high, covered on these inside walls with wooden lattice work, over which wisteria was growing in abundance. It was so pretty it looked almost theatrical, as though it were intended for the scenery of an idyll or a poetic love scene.

Winding streets paved with cobble stones, and narrow alleys under dark archways, tempted us to explore, and here and there we would come upon a dingy barred window, or a solid iron door, remnants of the olden days. In the historical chateau which we visited, we saw secret passages between double walls, and a trap door down which the bodies of the king's enemies were quietly dropped in the olden days, to be carried away by the water flowing in the moat beneath.

The old churches were lovely, and abounded in history, although one altar was very modern and sad, commemorating the death of those belonging to the city who had died at the front. It was pathetic to see the people in mourning who came in to pray for their dead.

Many of these churches claimed Joan of Arc as one of their former worshippers, but if she really attended them all, she must have been a very busy lady, especially while running her own war in the way she did. The town was full of reminiscences of her, and souvenirs *ad lib.*, Joan's profile on some of these, and the chateau and its emblems on others.

One of the nurses wanted to explore outside the city, and thought the most interesting way would be to ride a bicycle. After some

difficulty, owing to the absence of brakes on those in one store, or of good bicycles in another and too many punctured tires in a third, she succeeded in obtaining a wheel and started out. It was a warm afternoon, and each shady street looking inviting, so, with a reckless disregard for direction or distance, she went down them all. The bicycle had been hired for one hour, so, allowing twenty-five minutes to reach the city, she started towards it. But somehow it seemed to have moved! Although she found inhabited streets, none of them led to the city, they all opened into the country, with a vista of fields and trees. The city was certainly lost! She began to feel a little nervous, when riding slowly ahead, she saw an American soldier. She speeded up and overtook him, and inquired where the town was.

"I can direct you," he answered, "but I cannot show you. You know the rules." Which reminds one of a joke heard the other night at a soldiers' minstrel show.

"The nurses have eleven commandments, and the eleventh is 'Thou shalt not mingle.'"

It is the rule of camp and hospital that nurses shall not walk or talk with enlisted men, and some of the men resent it. Evidently this man had some reason for remembering it, but he directed the nurse on her way, and she found she had crossed the railway track without noticing it, and only had to cross it again, and ride a short distance, before she was in the heart of the small city. The other nurses laughed at her for getting lost so near home, but she insisted the city was at fault.

The boys make such good patients and are full of anecdotes and stories. One boy told of a friend of his who wrote home that he was a K. P. Now K. P. means doing kitchen police work, such as washing dishes, etc., which very few of the men like, although it falls to the lot of a private, sooner or later. His mother, however, thought it was rank of some kind, and she wrote him a nice motherly letter, cautioning him to be good to the boys, and remember the day when he was a private soldier!

The day came when we left this old town, and traveled all night towards our new destination, arriving at a little country station at 4.30 a. m., where no one expected us, and consequently no one met us. Two nurses started out to hunt up the hospital, while the others awaited events. After sitting on our suit cases a long, long time, we decided to find some coffee, if coffee there was, and we sighted a hotel just outside the station. One by one we drifted over there, but it was still early, and we waited another long, long time. At last a maid brought in some cups, and things looked promising. One nurse, wishing to hurry things, tried to say in French, "I am hungry," but

owing to the different way of expressing things in the French language, she absolutely failed. Instead of saying "*J'ai faim*," she said "*Je suis faim*," which sounded to the little French maid like "I am a woman." She opened her eyes very wide, tapped her chest, and said:

"Moi, je suis femme, aussi, madame," looking very puzzled. However she served us black coffee, bread and eggs, even if we were all crazy. Butter, milk and sugar are great luxuries over here.

Our little knowledge of French amuses the natives sometimes. One nurse, while shopping, asked for three kilometres of silk, instead of three metres. A kilometre is almost a mile!

In every large company of people there are some who burst forth into singing at the slightest provocation. Our new location, with its vivid blue sky and sunny weather, brought out latent talent amongst our own forces. We enjoyed the many colored butterflies, which flitted around us during our country rambles, but in the camp a different kind of winged visitor became entirely too attentive. Wasps! After a few days of dodging these, the following jingle appeared:

Oh, buzzy wuzzy yellow coat,
A week of you is enough.
A welcome long drawn out like this,
Is really pretty tough.
So fly away to old Berlin,
And talk to Kaiser Bill,
You'll find the way is "*A la droite!*"
Across the first high hill!

COMMUNITY WORK IN THE PREVENTION OF INFANT AND CHILD MORTALITY

BY A. GERTRUDE HINES, R.N.

Spencer, Massachusetts

The preserving of child life should surely be the responsibility of all communities. It is not enough that children's hospital wards are supplied with toys at Christmas or that flowers are sent when they are sick or dead. It is to prevent these very things being necessary to so large an extent that all minds must be turned and turned to some purpose.

In most cities, especially in the east, there is much being done, but in small towns and rural communities where most people think children are so safe and healthy, but where statistics show that our

greatest infant and child mortality exists, there is great need for concerted community effort. There it is that municipal sanitation is at such a low ebb, milk supplies are not inspected, water supply is inadequate and unsupervised, proper care of children is almost unknown to so many, no precaution is taken against children's diseases, and "swat the fly" was never heard or at least is not comprehended.

It seems beyond belief that in this age so many children should be at the mercy of unenlightened beings or of beings who do not practice their knowledge. These conditions can be remedied by the team work of communities. In a town or village where there is no Board of Health, one can be created; in towns where one exists, let it be active. Boards of Education should think in terms of health as their basis for training children. It is through these two civic organs, coöperating, that the entering wedge of interest in child welfare in rural places can best be driven.

The Board of Health by its authority energetically and justly applied can gradually bring about a better standard of sanitation which directly influences the health of all children. By employing a stranger trained in sanitation, and one who does not know the histories of the families well enough to cause embarrassment in carrying out the health laws, who understands the rural mind and is tactful enough to deal with it without friction, wonders can be accomplished toward the education of the public.

The problems of health education in the small town differ greatly from those in larger places, since there are no organizations to call upon, thus making the work much more difficult. So it is that the officer employed must needs be well trained to be of value.

The Board of Education has for its share, a school nurse and medical inspection of school children. Medical inspection is of the greatest value to parents as well as to pupils, by detecting defects in children and reporting these to parents, it not only gives the children an equal physical chance in life, but it is of economic value to the parents as well, since by giving the child a better chance, it makes his ability, and consequently his earning power, just so much greater.

The work of the school nurse is inestimable. Her follow-up work of the medical inspection is enough to justify her existence, for it is she who visits, coaxes, urges, and persuades the parents to correct the defects found. Through her example of scrupulous cleanliness, her work, her talks, her home visits, and above all her classes on Home Nursing and Hygiene and Baby Lore, she gives a broad education in health. To these classes should be given great encouragement, as it is through the children that many parents are reached and then, too, these school girls are the future mothers. The best

work along this line can be done with older girls but the small girls can be taught much and should not be overlooked. Experience shows that the positions of school nurse and sanitary worker can be joined to very great advantage, thus cutting down community expense for salaries and giving efficient service as well.

When it has been demonstrated that the work of these two coöperated boards can accomplish so much, the public will more readily employ the Community Nurse. Her salary may be provided through private or public funds but it should be thoroughly understood that she in no way represents charity, or her usefulness is crippled. Small-town pride is a formidable force to be reckoned with, but whether in large or small communities, charity, as such, has no place in public health work.

With the advent of the Community Nurse who has a social sense, comes home development of health culture. This nurse has the most wonderful of all ways of gaining access to homes and the confidence of the people. She brings personal service. After she has made good in the eyes of the people, and this can be accomplished in as many different ways as there are personalities in the nursing profession, she can lead them into any path she chooses. She can establish valuable mothers' clubs where health matters are discussed, and that always means babies and children to mothers, so they are most interested. Perhaps she can even have a clinic established for pre-natal care, after enough civic interest has been aroused in this health work. How wonderful that would be, to have these mothers, who know so little what physical care is or how to obtain it, taken care of almost in spite of themselves. In small towns where medical service is not always adequate and where many babies are born without medical care, how valuable would be pre-natal care and instruction. Would it not also make our country medical men just a little more careful and interested in this very great question, if their aid were asked? Many of them visit their obstetrical cases but once and sometimes not at all after delivery. This is the common experience of anyone who knows of rural work. There may be just cause for such neglect sometimes, but not always.

The milk station does not always seem the most practical for small town work, since there are comparatively few to use it at a given time. Therefore the nurse can best manage this part of baby care by teaching the mothers in their homes and by the school classes, when artificial feeding is necessary. Such home teaching develops the sense of responsibility in the mother helping her toward an intelligent understanding of her baby. This is not possible in a large community but it has always seemed to me that a greater step was

taken toward the education of the mother every time this could be accomplished.

The activities of the community nurse are almost unlimited when they are carried out in a level-headed, dignified manner. We need for it a well-trained public health worker.

The Board of Trade or, if there is no such organization, the business men, should feel their responsibility in this movement. Without them this work would be impossible of accomplishment to its fullest extent.

A man who does not earn sufficient and earn it steadily cannot give his family necessary care. If the mother of a family must help support the house, her children are not given proper care. It is the part of the business men to see that sufficient money is paid to the wage earner according to his work.

If we have a foreign population to deal with, which we will have soon in nearly all small places as well as in large ones, would it not be helpful to follow the example of larger places and have night schools or at least night classes in English? Here could be taught American standards of living at the same time that the students are learning our language. This would make them comprehend better other work done for them.

These are matters familiar enough to all concerned in public health work but in places where there are no organized bodies to look after them, the towns must be made to feel their responsibility. By awakening a sense of human responsibility in the public mind to such a degree that citizens are willing to meet that responsibility in the best possible way, even to the extent of expending sums of money in making their community sanitary and in the education of all mothers in the care of themselves and their children, we are protecting the lives and increasing the number of lives of this and of future generations.

EXPERIENCES IN A TEMPORARY ISOLATION HOSPITAL

BY KATHERINE FINN, R.N.

Summit, N. J.

It is not my intention to write a paper on Poliomyelitis, but merely to tell those who may be interested, something of our experiences, cases and mode of living in the S. isolation hospital.

The building used was a small one of two stories, having two wards and a hall on the first floor, a bedroom, hall and kitchen on the second. The hall on the first floor was between the two wards. Our

telephone and chart-table were here and here we ironed our clothes, in fact, washed them too, during the first six weeks when we could not get a laundress. Here our leisure hours of night duty were passed and here we amused ourselves when work was done; a bare place, having by way of furniture a table, two chairs and a step-ladder.

Six beds, with as many small tables, the latter covered with white oil-cloth, and two hat trees used as poles for irrigating cans, comprised the furniture of the wards.

The nurses' bedroom was opposite the kitchen on the second floor and though the night nurse spent her day there, she did very little sleeping. For this reason one changed from night to day duty every week.

The work of the day nurse began at seven a. m., when she brought breakfast down for her small patients and, after feeding those who were very ill, joined the night nurse in the kitchen for her own meal, leaving the feeding of the other patients to the two mothers, one of whom served as cook, the other as general helper. Breakfast over, the nurse gathered up the patients' dishes and boiled them in a huge pot over the kitchen fire. Then came the usual routine of temperature, medicines, baths, treatments, adjusting of splints, etc. We had constant interruptions meanwhile, the crying of children, the insistent ringing of the telephone, and the troubles of everyone brought to the nurse. The doctor, whose visit was the event of the day, usually arrived at eleven o'clock.

We had, in all, twelve patients, no two cases alike yet none of whose symptoms differed. The same irritability, nervousness, and for the first few days, twitching, characterized each. The patient's head was drawn back, there was frequently nausea, and although diorrhea sometimes was present for a few days, the patient was decidedly constipated for at least a month following. Fever, moderately high, was present as a rule for the first three days. The tongue was peculiarly furred, the breath, perspiration, and in fact all the excretions of the body had the same odor. Then, within forty-eight hours, paralysis develops. There is danger of this spreading, for three days, the slightest of nervous shocks being likely to produce the gravest symptoms.

We were, indeed, fortunate in losing but one case, although for some time we were in doubt as to what chances of recovery two others had.

During the first few weeks, the affected limbs were kept in splints, being taken out twice daily, after the first month, for hot packs. Sedatives in the form of bromides were given as well as intestinal antiseptics. A nose and throat spray of twenty per cent

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argyrol was used daily for the first month. These, with an occasional mild cardiac stimulant, given when needed, comprised the main treatments. The massaging of the affected limbs was not begun, as a rule, until some time after the patient's discharge from the hospital.

I should like to tell you about one case. This was a child of three years. When he was brought into the hospital he was in an extremely nervous state, twitching and moaning almost constantly. His head was bent back, body and legs were rigid and the fever was higher than was generally the rule. The pupils of his eyes were dilated and his face was drawn as though he were dreadfully frightened. At the slightest jar he screamed. In twenty-four hours there was no change for the better, in fact one of the arms was rigid, and before six hours more had passed, the other became affected also. The twitching and moaning had now stopped, and the boy lay rigid with wide eyes staring at the ceiling as one in great terror. The fever had not abated. That night, however, he slept and upon waking next morning, smiled; his temperature was lower and his arms less rigid. Gradually he regained the use of his limbs and in less than eight weeks he was playing and walking about.

The days on which orders and letters from the outside world reached us were eventful indeed.

Sometimes particularly bold strangers would venture within sight, in the surrounding woods, causing wild excitement and curiosity on our part. As a rule it would prove to be parents who, after the first two weeks, were freed from quarantine and came to look through the screen doors at their little ones and to bring them toys and candy.

At last weeks came when the anxiety was not so great and the work was less strenuous. So, by the time Hallowe'en arrived, we had but four patients and three of these were able to walk. We gave them a party on that night with the traditional Jack-o-lanterns, candles, ducking for apples and potato races, so loved by the children.

On the day before our release, we worked like Trojans; packing one of the wards and putting everything in it, then lighting the formaldehyde candles. We wore, that day, only what we could not dispense with. So wild were we to see homes and friends again that there were few who slept that night.

November the sixth dawned. Such a listing of supplies, preparing the entire building for fumigation, then at noon, bichloride baths and—freedom!

NAVAL NURSING SERVICE

BY MARY G. WOOD, R.N.

Member of the U. S. Naval Reserve Force

The day we received orders to report for duty in the Navy was an eventful one in our lives. For several months we had waited for the call, and the realization that we were, at last, active members of Uncle Sam's Naval force filled our hearts with joy that was not dimmed even by the parting with home folks.

Having arrived at the destination named in our transportation orders, we learned, through inquiries, that the Naval Hospital was nine miles from town; as there was uncertainty as to car schedule, and as night was at hand, we decided to make the final lap of our journey in a Ford. We were having a jolly ride, five of us and our hand-bags in one car, when we suddenly found ourselves up against a brick wall, literally, but the large gate opened quickly when the sentry was informed that we were nurses for the hospital. A cordial greeting from the Chief Nurse, and the remark that she had been expecting us for a week, made us feel that we were indeed welcome.

The next morning, after an instructive talk from the Chief Nurse, we were assigned to duty and our work had begun in reality.

To nurses who have been out of school for several years, the long wards and rows of beds bring visions of training-school days, and it does not all end in mental pictures for there are methods and regulations to be learned that we did not get in civil hospitals.

The duties of the nurse are mainly those of supervision and responsibility for the work of the hospital corps men in her ward. The first days were devoted principally to learning the routine paper work and daily detail of cleaning (each day having a special detail in addition to the usual ward work), and "Sufficient unto the day," etc., if these details are not carried out, for the reckoning comes with Saturday inspection.

One of the "duties" (not listed) is to master the sailor's phraseology. "Swab the deck," "Close the hatches," "Rush the chow," etc., were puzzling, but it was not long before we were using the terms with quite a "sea-going" accent.

The nurses' quarters is a long, airy building in the front of the hospital grounds where we have a fine view of the beach and get the sea breezes from the south. All conveniences and accessories of an up-to-date home, including telephone service and a Victrola, make the quarters very cozy and comfortable. A large screened porch, generously supplied with chairs and a swing, is a luxury that we appreciated more as the summer days approached. But the comfortable furnishings of the home are second in importance to the genial com-

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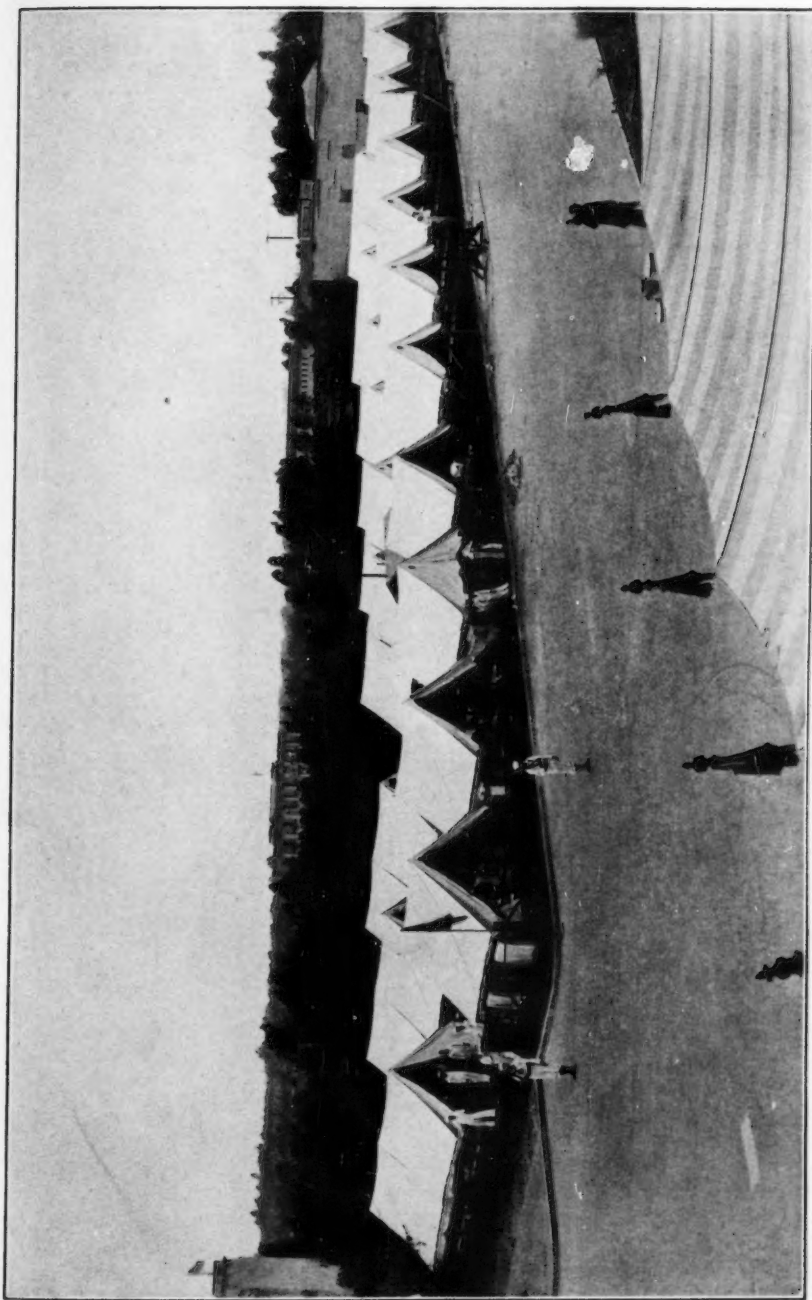
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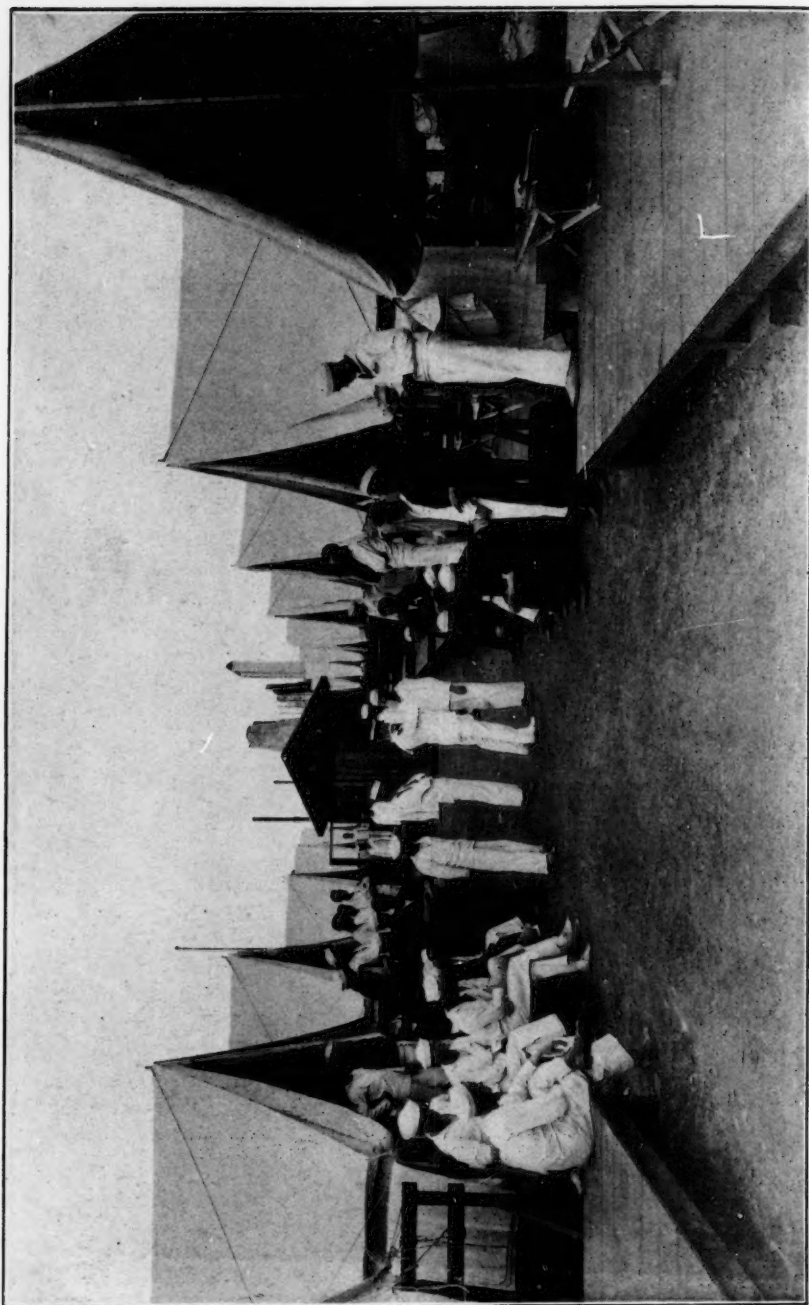
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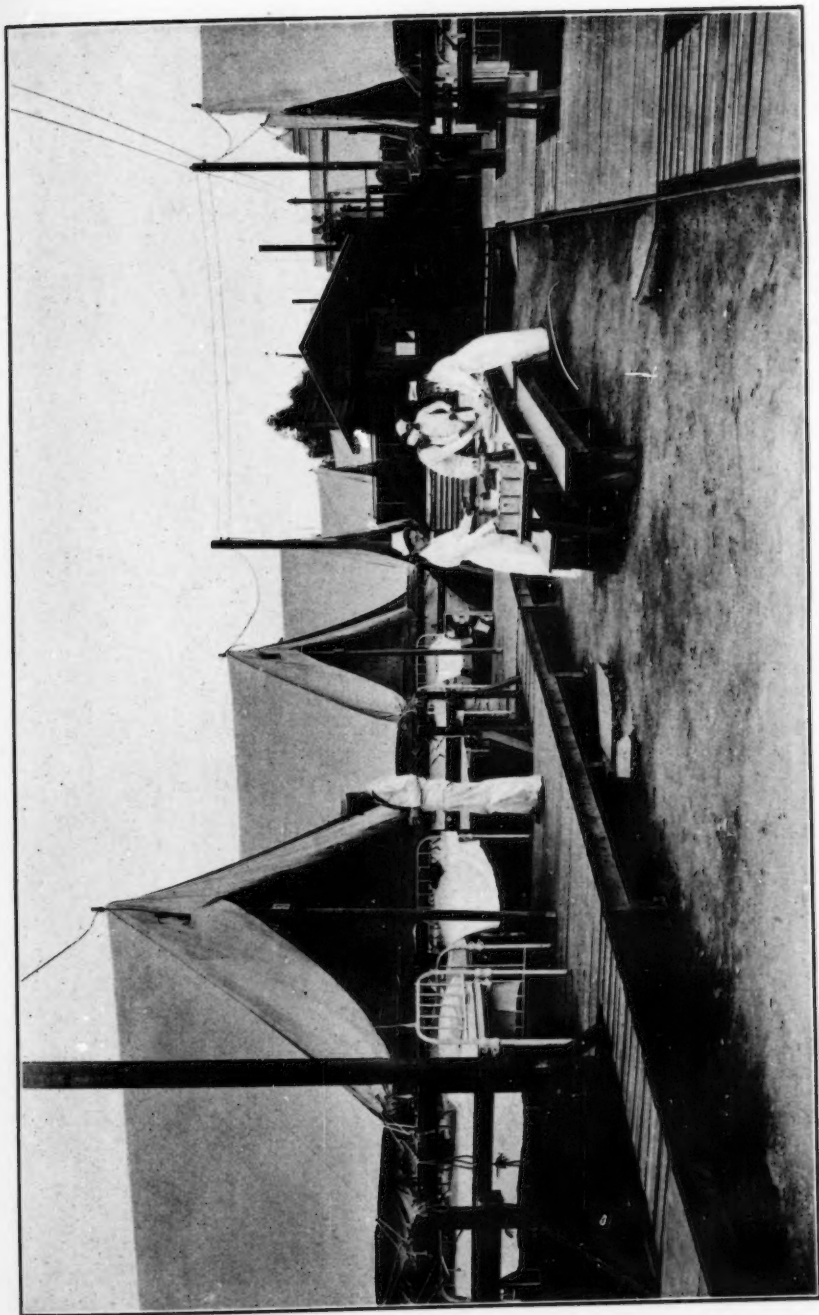
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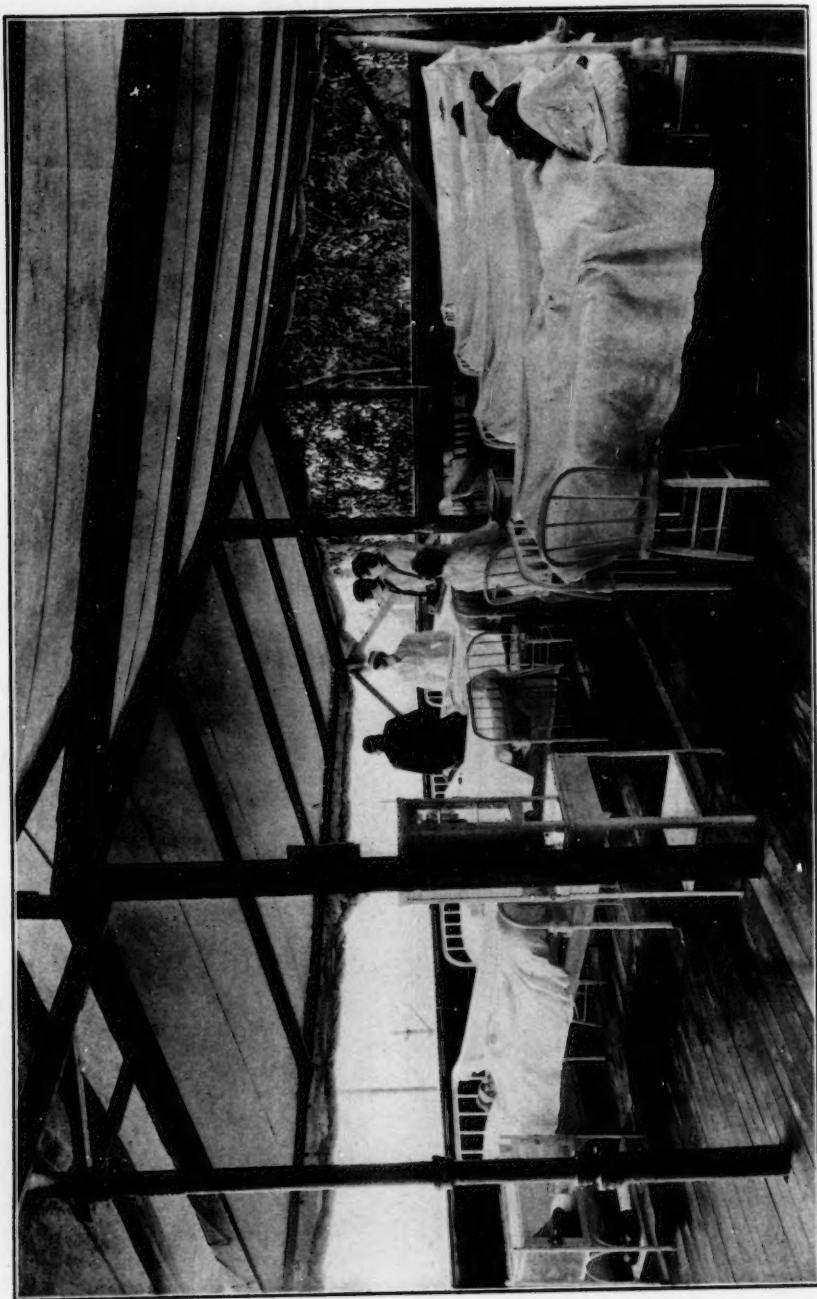
Isolation Camp, San Diego, California



Interior of Isolation Camp



Isolation Camp—Setting up Mess Gear



Pneumonia Ward

panionship which we enjoy with the Chief Nurse and the other regular nurses.

With only eight-hour duty, we have time for walks in the woods which are back of the hospital grounds, or along the beach where we may watch the aviators and sea-gulls vie with each other in aerial stunts; and for other recreations. On Thursday afternoons there is a concert by the band from the Air Station; this is primarily for the patients, but we enjoy it too. There is also the weekly picture show which is the occasion for a large gathering of convalescing patients, doctors, nurses and corpsmen in the mess hall where the machine is installed. The films are good and admission is free.

A tennis court is being prepared for us, and later on we are to have a bathing pier for our exclusive use. The beach at this point is one of the best on the southern coast.

The nearest city is only thirty minutes' ride distant by trolley, but we do not go often, as there are quite enough places of interest in our immediate vicinity to occupy our leisure hours.

I wish it were possible to convey our viewpoint to the many nurses who are hesitating about entering the service. If they might stand at attention with us just once, as our beloved flag is being hoisted to the breeze—the flag that typifies the freedom of the world—I believe their indecision would vanish at that moment.

NURSING CARE OF ALCOHOLIC AND DRUG ADDICTIONS

BY CARL SCHEFFEL, PH.B., M.D.

Boston, Mass.

In the entire field of nursing there are, in some respects, no more difficult patients to care for than those unfortunates addicted to the intemperate use of alcohol or drugs. The role the nurse must play in the handling of these patients depends somewhat upon the method of treatment adopted and whether it is to be carried out in an institution or attempted in the home of the patient.

Regardless, however, of how or where treatment is undertaken, many problems in common present themselves for solution in all of these cases. First of all, it is of the utmost importance that the nurse should understand and appreciate that these patients are suffering from a chronic disease affecting both mind and body. They are to be treated as sick patients and not as social outcasts or criminals. In fact they are very apt to be super-sensitive concerning their addictions, and in their proper care a nurse's tact, patience, and judgment are often taxed to the utmost.

It not uncommonly happens that these patients are brought for treatment not entirely of their own accord. Many times they are placed in institutions by relatives or friends who are much more desirous of freeing them of their addictions than the patients are to be freed. In such instances the patients are brought face to face with the physicians and nurses with a preconceived ill-feeling or even horror for the entire undertaking. In other words, they are not in a receptive attitude of mind and will not coöperate with those whose task it is to assist them out of their slavery to alcohol or drugs. Here the first opportunity for skilful nursing presents itself,—in breaking down the ill-feeling or apathy, and creating a favorable mental state that will assist in overcoming the addiction. It matters not whether we believe in the predominance of mental or physical factors in these habit cases, the so-called “unpoisoning” of the body without a cheerful mental attitude behind it, will no more overcome these addictions than will skilful mental manipulations without considering a body suffering from chronic intoxication. This is perhaps one of the reasons why many of the extreme therapeutic measures result in failure in the treatment of these patients. The one class goes to the extreme and attempts to treat the mind without taking into consideration a poisoned body, and the others think that by “unpoisoning” the body the mind will take care of itself. Both are neglecting important factors in the successful treatment of habit cases.

According to the laws of psycho-physical parallelism, every mental action has a corresponding physical reaction and vice versa; consequently the individual whose body is poisoned by the intemperate use of alcohol or drugs cannot, for the time being, think or act entirely normally.

Truly, in caring for alcoholic and drug addicts, outside of her regular nursing knowledge, the nurse should be well grounded in modern applied psychology because she is in a position to powerfully influence the patient by her constant association and attention. Except in very unusual instances, the physician rarely sees the patient more than an hour or so out of the twenty-four, and the thousand and one changes apt to take place in these patients' mental states in the interval must be skilfully handled by the nurse alone.

The nurse should do all in her power to keep the patient's mind in a tranquil state. Avoid in every possible way irritating an already super-sensitive nervous system. With these patients, more than with any others, it is not so much what is said or done, but how it is said or done. Under no circumstances should the nurse lose her self-control while caring either for an alcohol or drug addict. She should have unusual patience and forbearance with nagging, teasing, or

disagreeable patients. Never must she display the least sign of fright in case of delirium or violence because this class of patients is unusually keen in detecting mental weaknesses in their attendants. Once a physician or nurse has shown doubt, fear, or hesitancy, by word or action, he will thereafter have little or no control or influence over these patients, and, in a ward or recreation room, it is surprising how rapidly this loss of control will spread.

The nurse should be firm and dignified, but at all times kind. In unusual circumstances, such as extreme restlessness or noisiness, it is justifiable for the nurse to employ suggestive measures that tend to arouse the patient's emotive state. For example, in case of a patient unduly noisy because the accustomed drug or stimulant is not forthcoming, a few well-directed words given in the proper tone may so arouse the emotive consciousness that for a long period thereafter the patient's mind may be occupied in analyzing the uttered words, their significance, and their mental reaction. Many times a complete change in the patient's train of thought may be accomplished in this manner, so that the desire for the narcotic or stimulant may be entirely forgotten for many hours or even for the entire day.

After the offending drug or the alcohol has been entirely withdrawn, there usually comes a stage with certain neurotic individuals when every discomfort is attributed to the absence of the accustomed drug or stimulant and it may require considerable tact and patience to guide a patient over this period. Keep your patient's mind occupied and apply proper suggestions skilfully and persistently; endeavor to direct their attention to anything and everything but themselves.

Concerning the many little duties of the nurse, it should not be forgotten that this class of patients, like others, appreciate a neatly arranged tray, a rubbing and a bed free from wrinkles. They require every nursing care that any other medical case should have and in addition the most careful psychological handling. In drug addictions good nursing means good will. Stop and consider, if you will, that many of these unfortunates have acquired their habit because they were first given the drug by some physician for the relief of some painful condition. Indeed, a large percentage of drug takers have been in the care of nurses before, many have made the rounds of the various institutions and all, as a rule, know what good nursing is; they expect and are entitled to nothing but the best. In these patients, more than in any other class, have a heart, treat them kindly, remember they are sick bodily and mentally and they must not be looked upon as outcasts or criminals simply because they have become the unfortunate slaves of demon rum or drugs.

THE RED CROSS

IN CHARGE OF

JANE A. DELANO, R.N.

Director, Department of Nursing

MEETING THE SPANISH INFLUENZA SITUATION

With the appropriation by the Red Cross War Council of \$575,000.00, to be used in combating the epidemic of Spanish influenza that has been ravaging the Atlantic seaboard, it became necessary to develop a plan for meeting the general situation over the entire country.

A special committee, representing the American Red Cross and the Federal Public Health Service, was appointed to outline a general plan of coöperation between the two organizations. The director of the Department of Nursing was a member of this committee.

Definite instructions were, at once, sent to Division Headquarters for transmission to all Red Cross Chapters, suggesting various methods of meeting the epidemic situation.

The fund appropriated was made available for nursing service and for emergency hospital supplies, when local authorities were unable to meet the situation requested through the Federal Public Health Service. Chapters were instructed to refer all requests for nursing personnel to the Federal Public Health Service representative, in order that the distribution of nurses might be made nationally in as equitable a manner as possible. Chapters were urged to develop to the utmost their own local resources.

Chapters were also urged not to go out of their own locality for nursing personnel, except with the approval of Division offices, and Division headquarters were instructed not to call on other divisions for assistance without approval from Red Cross headquarters. This was done to prevent unequal distribution of nurses.

Recruiting headquarters were suggested where all nursing personnel, including graduates, undergraduates, nurses' aids and volunteers, could be listed and distributed as needed, locally.

A standard schedule of prices was approved by the Federal Public Service, the Surgeon General of the Army and the American Red Cross, in order that one organization should not bid against the other, and to prevent one state from securing nursing personnel at the expense of an adjoining state, equally in need. Another reason for this decision was that it seemed unfair to the 20,000 nurses, who had already accepted war service at the standard rate of \$60.00 a month in

this country, and who were also in the cantonment hospitals battling with the epidemic and giving their lives in the service.

It is, however, to the credit of the nurses of the country, that, in our first appeal, before an appropriation for this work had been made, over 1500 nurses responded without any inquiries, so far as we know, in regard to the compensation which they might expect. This is typical of the spirit of the nurses of America, and will always be remembered by those of us who have tried to meet conditions unparalleled in the history of the country, as a splendid evidence of their loyalty and unselfish devotion.

Not only have our own nurses responded to the call, but, in the very beginning of the epidemic, Canadian nurses came to the assistance of the New England states, and many of them are now working side by side with our own nurses in an effort to control the epidemic as well as in our cantonments and hospitals.

Every effort was made to appeal strongly through the public press for the service needed, and every Red Cross Chapter was urged to neglect no method that would help to meet the need.

Home Defense nurses have responded quickly, and it has been necessary to rely largely upon them, as hundreds of nurses were holding themselves available for foreign service, and it seemed undesirable to place them where they might not be easily available as sailings are secured.

The burden which has fallen upon the Red Cross Nursing Service has included, not only the needs of the Army and Navy, but the demands have been equally great from munition and ship-building plants, and other essential war industries. The civilian hospitals have also turned to us for assistance and, whenever possible, nurses and volunteers have been assigned to duty.

Our Division offices have been overwhelmed with demands but, due to the pressure of work, it has been impossible, as yet, to secure complete reports of their accomplishments.

The situation in Washington is, possibly, typical of other communities, and the following description of the plan adopted here may be helpful.

Washington was fortunate in the fact that the influenza did not reach the District of Columbia until a few days after its development in more northern places, so that before it made great headway, we were able to develop a central organization of the public health nursing resources of the District. Mary E. Lent, inspector of nursing for the cantonment zones, was recalled to Washington, and cooperated with Elizabeth A. Fox, director of the Red Cross Bureau of Public Health Nursing, in organizing the central visiting nurses' associa-

tion. A central headquarters was established and placed in charge of a chief nurse representing the Federal Public Health Service and the American Red Cross. Louise Boyd was released by the National Organization of Public Health Nursing to take charge of this work.

At the same time, a recruiting center in a prominent part of the business section was established and placed in charge of a Red Cross nurse, with sufficient assistance to meet the need. Telephones were promptly established, and motor service organized. Fannie E. Clement, former director of the Town and Country Public Health Service, was put in charge of the recruiting station.

No attempt was made to supply special nurses to individual patients, but all calls from private houses were referred to the Public Health Nursing headquarters, rich and poor alike sharing in their ministrations.

The city was districted, and a nurse placed in charge of each district, with a district kitchen upon which she could call for suitable hot food for patients in rooming houses, where it was impossible for them to be supplied.

A motor service was organized for the transportation of nurses and such food. Requests were sent out for the loan of thermos bottles.

Advertisements were placed in the local papers, indicating the types of volunteers desired. As the schools were closed, by order of the Department of Education, the teachers were asked to volunteer as assistants either to the nurses or for such clerical services as might be needed. The Chapter also developed a special group of workers for the care of children, and housekeepers, in homes where the needs were greatest.

To further meet the local conditions, arrangements were made, October 3, to open a temporary hospital for the use of war workers, ill of Spanish influenza and pneumonia, and five days later, the hospital was opened, completely equipped to meet the situation which threatened to stop Government machinery. Provisions were made in the hospital for 100 beds to start with, the plan to be extended as necessary.

Miss R. Inde Albaugh, a Red Cross nurse of Connecticut, assisted in the work of organization, and Lucy Minnigerode was appointed temporary supervisor. The Red Cross supplies the nursing personnel and equipment, and the hospital at this writing is in full swing to care for sick war workers. The close proximity of Washington to many of the large camps, and the fact that Washington civilian hospitals were over-crowded and in many cases not large enough to care for its increased population, made this hospital the answer to an imperative need.

In addition to the nurses assigned through the Bureau of Field Service, ten public health nurses have been assigned by Miss Fox, through the Bureau of Public Health Nursing. They were sent to North Carolina, South Carolina and Alabama.

ASSIGNMENT OF NURSES THROUGH THE BUREAU OF FIELD SERVICE

BY CLARA D. NOYES, R.N.

The first call for nurses to meet the epidemic of Spanish influenza that swept with such rapidity from the Canadian border as far south as Norfolk, reached Red Cross headquarters September 14. It came from the Public Health Service of Massachusetts, and requested that fifteen trained nurses be sent immediately to the Quarantine Station in the Boston Harbor. These were on their way a few hours after the call came. The situation in Massachusetts, where the epidemic apparently started, quickly became acute, spreading to the cantonments, ship-building and munitions plants.

The necessity for continuing to assign nurses to military duty, both in France and in the cantonments, where the crowded conditions produce an appalling condition, threw the responsibility of service in this emergency almost entirely on the Home Defense nurses. All Divisions were notified to report the number of Home Defense nurses enrolled and those ready for immediate duty, and to keep headquarters informed of the number assigned. They were also advised, before calling on headquarters, to use all possible local nursing resources.

Hundreds of telegrams were sent to enrolled Red Cross nurses asking them to hasten the date of their availability for military service. The response from nurses was quite remarkable, and since that time, papers of nurses have been sent to the War Department, at the rate of about ninety a day, the majority of them immediately available for service. It was felt that if military needs in cantonments could be met by nurses enrolled for active service, the Home Defense nurses sent in the early days of the epidemic could be withdrawn for civilian needs.

The reports from the Divisions showed a total of 2456 Home Defense nurses enrolled in all divisions. The report of assignments, by no means complete, showed 1253 nurses in the field. A total of 448 nurses were assigned to the New England Division. Two hundred of these were supplied from the outside, between twenty-five and fifty being Canadian nurses, who volunteered before the epidemic spread so alarmingly through Canada that no more help could be expected from that point.

At Camp Devens, the first camp, so far as we know, where the

disease made rapid headway, forty-eight of the nurses supplied by the Red Cross became ill. The Army immediately hurried nurses to this post, withdrawing them from other cantonments. As nurses from the Army reached the cantonments, those supplied by the Red Cross were withdrawn and placed elsewhere. Colored Red Cross nurses were called into service, and were used in many places where the demand for graduate nurses existed, such as Newport News, where four colored nurses were assigned to duty at the request of local authorities.

The opening of temporary hospitals all over the country, to meet the situation, brought calls for nursing personnel, which were supplied as quickly as possible.

The situation in the powder, ship-building and munition plants kept pace with that in the camps and, although incomplete as to actual assignments, the reports show that nurses were supplied to the Emergency Fleet Corporation, Philadelphia, to Hopewell, Va., Fore River, Quincy, Mass., Bristol, Chester, Old Hickory Powder Plant, Nashville, Tenn., Dupont Company, and many other large and small essential war industries.

The need for nurses in the civilian hospitals was also great and was supplied as far as possible.

Reports have been received from Divisions showing that the epidemic has spread as far west as the Pacific coast. Nurses have been assigned to American Lake, Camp Kearney, Cal., Flagstaff and Winslow, Arizona, and elsewhere through the west.

The Central Division has performed an unusual amount of work, giving great credit to the organizing ability of the Division Director. Since the epidemic started in the Division,—which includes the states, Wisconsin, Michigan, Nebraska, Iowa and Illinois, over 900 nurses and aids have been assigned to meet military and civilian needs. Two hundred and seven were sent to Camp Dodge, alone. These are now being withdrawn to meet the civilian needs.

In no epidemic of which we have knowledge, have the nurses been so subject to infection. Hundreds have fallen ill, but we are glad to be able to say that the nurses generally have recognized that the work is of equal importance with that being done by the nurses in France, worthy of the greatest sacrifice it is in their power to give, and have not hesitated to make it.

The routine work at National Headquarters is continuing without interruption. The Greek unit, reported ready in the last number of the JOURNAL, has sailed. An interesting unit is now being organized, composed of Czecho-Slovak nurses and nurses' aides, and will sail in the near future. The latter are now being prepared under the auspices of the Red Cross.

DEPARTMENT OF PUBLIC HEALTH NURSING

IN CHARGE OF

EDNA L. FOLEY, R.N.

Ohio: Cleveland.—Feeling the need of more frequent conferences between superintendents and supervisors of the different public health groups, the University District for the training of public health nurses called a meeting in April of all the public health nurses serving as superintendents or supervisors of any department of public health nursing in Cleveland. So successful a meeting was held that now monthly meetings are called. The conferences are very informal, the Chief Nurse of the agency that calls the meeting, presiding and opening the discussion. Problems common to all groups are taken up and the "Public Health Nurse Supervisors' Meetings," as the round tables are called, are proving most stimulating and helpful.

Cecilia Evans, Director of the University District work, was loaned to the University of California for the summer, to take charge of a short course offered by it in Los Angeles, in public health nursing. Geneva Olcott, a graduate of the San Francisco County Hospital, and a student in the first course for public health nurses given at Berkeley last year by the University of California, was this year director of a similar course at Berkeley.

Illinois: Elgin.—Elizabeth Arundale (Chicago Hospital), has recently been appointed community nurse for the town of Elgin. The first tuberculosis dispensary in the city was opened in June and registered twenty patients. Elgin hopes to secure a county sanatorium which can be had only by means of a referendum vote. When this notice was written, 75 of the 100 signatures required before the project could be considered, had been secured. The prospect is promising, and the good work of the Tuberculosis Society which supports the work of the community nurse is going to make the campaign an effective one.

The association also began its first child welfare conference where measuring and weighing of babies and children is now going on. A dental clinic is being discussed. A census of dentists has been taken. There are twenty-four in the town, and every one of them was willing to give at least one-half day a month for free work.

Danville.—In February, the Health Department of Danville put on two visiting nurses, Marie Hahn and Ella Wheeler, both graduates of the Lake View Hospital, Danville. A tuberculosis dispensary was opened at the same time and is doing effective work. A welfare station supported by the committee of the State Council of Defense,

was opened in June. The nurses are doing all the tuberculosis work, the Metropolitan work and the child welfare work, and in time hope to extend their service to other patients. Each nurse owns her own car, but the city pays for the gasoline used.

Kansas.—At last accounts (July 1, 1918), Kansas had public health nurses pretty well scattered throughout the state, in Lawrence, Atchison, Topeka, Hutchison, Newton, Wellington, Wichita, Emporia, Pittsburgh, Kansas City, Arkansas City, and El Dorado, Butler County. Within the last few months, since the oil boom, Butler County has employed eight public health nurses, two of whom were from Chicago, and a third nurse has just gone down from the Chicago Visiting Nurse Association, Walborg Zetterwold, to succeed Mary Darr in the county school work, while Miss Darr undertakes the visiting nurse work for the town of El Dorado. The Kansas nurses have a Public Health Nurses' State Association which is divided into eight districts, each district having its vice-chairman.

Nurses in Kansas and other places will be sorry to hear that Laura A. Neiswanger, president of the Kansas State Organization for Public Health Nursing, has been obliged to give up her work with the State Board of Health. She is teaching Red Cross classes in Elementary Hygiene and Home Care of the Sick at Osborne, Kansas.

Wichita.—In answer to a letter asking how much help a four months' course at the School of Civics and Philanthropy in Chicago had given a community nurse in Kansas, the following reply was received.

The course in the School of Civics and the work with the Visiting Nurse Association are so closely connected it is hard to separate them and leave one complete. I never realized this so much as when seven school nurses met at a round table to discuss our schedule of work and just what we were doing. Not all were trained workers, but only two of us had any system to our work. Several objected to home calls because they did not know how to meet the people. The lectures on Tuberculosis, those given in Rural Nursing, School Nursing and Visiting Nursing were especially helpful to me in ———, and gave me the theory for a working basis. The Visiting Nurse Association taught me how to meet the people and what to expect of them; how to keep records and how to form a working plan out of the theory received at the School of Civics. The Visiting Nurse Association also gave me the practical experience I needed to give me confidence in myself to do public health work. The School of Civics never failed to tell us we must be leaders because people expected it of us and that we must fit ourselves for that purpose. I did many things I did not want to do because of this. Had I not taken the course in public health work I never would have been able to do the work successfully. I must know what I am doing before I undertake it. The short courses will be an inducement for nurses to take up public health work.

Colorado.—Olive A. Chapman, formerly a supervisor at Henry Street Nurses' Settlement, and for several years with the Visiting

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Nurse Association of Colorado Springs, has accepted a new position as State Supervisor of Public Health Nursing for Colorado.

Pennsylvania.—Harriet C. Burrows, recently on the staff of the Visiting Nurse Association of Philadelphia, is at present industrial nurse for the Chester Shipbuilding Company, Limited, Chester, Pa.

Ohio.—A. J. Cunningham (New England Hospital, Boston, 1910), public health nurse at Bellefontaine, Ohio, has been elected an honorary member of the Logan County Medical Society.

Courses for Student Nurses.—Chicago is planning two courses for its senior student nurses, one a series of lectures on public health nursing, to be given on the south, north and west sides of the city. This has been arranged by Mrs. Theodore B. Sachs (Michael Reese Hospital), of the staff of the Chicago Tuberculosis Institute. The second course is one of four months in practical work and theory, to be given under the auspices of the American Red Cross, the Chicago School of Civics and Philanthropy, the Visiting Nurse Association and the Infant Welfare Society. The nurses will probably be housed in the Chicago Nurses' Club and it is hoped that Elnora Thomson, director of the Illinois Society for Mental Hygiene, now in Italy with Miss Gardner, will return in time to become director of the course.

Grand Rapids, Michigan, in connection with the Junior College of the city, is planning a longer course, part to be given by means of evening lectures, and eighteen weeks given as a special course for seniors. This has been planned by Ada Coleman, superintendent of the Visiting Nurse Association; Annie Morrison, executive secretary of the Grand Rapids Anti-Tuberculosis Society; Margaret Roche, superintendent of the Infant Feeding Clinics; and Etta Lee Gowdy, Kent County community nurse.

Some nurses are deterred from taking post-graduate courses in public health nursing because of the expense involved. The Public Health Nursing Bureau of the American Red Cross has a number of scholarships for just such nurses as these and inquiries directed to the Washington office will bring a nurse all the desired information. Few nurses can do successful public health nursing unless they have had experience on a large staff or have taken one of the many courses now being offered graduate nurses. The first permanent course to be opened on the Pacific Coast is at the University of the State of Washington, where Barbara H. Bartlett, B.S., of Teachers College, former tuberculosis head nurse of Chicago, has recently been appointed associate professor. A most successful ten weeks' course attended by thirty-five graduate nurses, has just been closed. The eight months' course opens this fall.

HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

A PRACTICAL WORKING RECORD SYSTEM

BY ALICE SHEPARD GILMAN, R.N.

(Continued from page 34)

4. THEORY SHEET

All grades are passed into the training school office by the instructors, with the number of hours, recitations, lectures, and laboratory; and these recorded by the assistant in charge of records. This does away entirely with the necessity of the record book for class work.

SUBJECT	CLASS				METHODS			TOTAL HRS.	INSTRUCTOR	RATE	C S
	PREL.	HT	DIS.	DIS.	LECT.	REC.	LAB.				
Anatomy and Physiology											
Bacteriology											
Bodilying											
Children's Nursing											
Class Room Practice											
Communicable Diseases											
Demonstrations											
Dietetics											
Ear, Eye, Nose, Throat											
Ethics											
History of Nursing											
Hygiene											
Materia Medica											
Medical Nursing											
Nervous and Insane											
Obstetrical Nursing											
Orthopedic Nursing											
Professional Problems											
Practical Nursing											
Public Health Nursing											
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Surgical Nursing											
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NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

ELISABETH ROBINSON SCOVIL

PNEUMONIA AND MENINGITIS.—The *Journal of the American Medical Association* says that pneumonia and meningitis are due to invasion of bacteria which are inhabitants of the upper respiratory tract, that the conditions under which they become widespread or epidemic are not understood, and that the only method for preventing their spread is to apply antiseptic methods to the mouth and nasopharynx. The application should be made in advance of the season of the year during which respiratory diseases prevail.

ALCOHOL: ITS ACTION ON THE HUMAN ORGANISM.—A small book with this title has been published in England under the direction of the Central Control Board. It is an attempt to state the existing knowledge on the subject without taking sides with any existing opinions. Contrary to the usual belief it is said the action of alcohol on the nerves is sedative and not stimulating, excepting possibly in its influence on the respiratory centers. Its seeming stimulative properties are due to the narcotic influence of the drug, which dulls the user's perception of unpleasant conditions and, by removing the control exercised by the higher nerve centers, renders him less self critical and makes him feel better and more efficient than he really is. In every case it impairs efficiency, whether noticeably so or not. It has a food value and may be useful in emergency cases, as in acute diseases. As it remains in the blood until oxidized, if present in sufficient amount it may seriously injure the tissues. To prevent direct injury to the mucous membrane of the stomach, alcohol should not be taken in concentrated form, nor without food.

THE PREVENTION OF GAS PAINS.—A writer in the *Journal of the American Medical Association* urges the abandonment of purging and dieting patients before abdominal operations. An eminent authority, Crile, has warned against these procedures because it interferes with the normal tone of the intestines, and many others have confirmed it. Emergency operations are seldom followed by the distressing gas pains. Experiments on animals have shown that pre-operative catharsis is harmful rather than beneficial; the majority showing increased intestinal gas. Most important of all, there is an unevenness in the gradient of muscular forces from duodenum to ileum which is essential to the progress of food and gas towards the anus.

MENTAL HYGIENE.—The *Canadian Medical Association Journal* gives a synopsis of an address delivered at the Toronto General Hospital by the director of the Boston Psychiatric Clinic, in which he stated that there are seventeen causes of feeble-mindedness, many of which are theoretically and practically preventable. Less than five per cent of mental weakness is caused by syphilis. The weak-minded could be divided into three classes, cases of brain disease, bodily disease where the brain affection was incidental, and those due to hereditary causes. Referring to the intellectual power of an individual, it is not the size of the cells as much as the spread of the cells that matters. The size of the brain varies with the size of the body.

DANGER OF PITUITARY SOLUTION IN LABOR.—In a paper on uterine inertia in the *Journal of the American Medical Association* the writer warns against the danger of the use of pituitary extract. He had three cases of hour glass contraction of the uterus with retained placenta as a result of its administration in the second stage and now reserves it for the third stage, after the expulsion of the placenta, to control uterine relaxation and hemorrhage.

CARE OF ILLEGITIMATE CHILDREN.—A bulletin of the Children's Bureau notes that in Norway the state holds both parents equally and continuously responsible for the care of their illegitimate child. They are charged with the care of its maintenance, education and training as if it had been born in wedlock. This is the first time the rights of these children have been nationally recognized.

THE CALCIUM REQUIREMENT OF MAN.—The *Journal of the American Medical Association* says observations indicate that the supply of calcium to the individual cannot be long neglected with impunity when there is special need for it, as during growth, gestation and milk production. It has been found that an average of about seven grains of lime per day is the minimum amount required for normal human nutrition. A pint of milk or less will supply this quantity, but it will require pounds of meat or of common milled cereals to furnish it. A pint of milk usually contains more of this element than the same volume of saturated lime water. Among all the inorganic elements in the body calcium is the most abundant.

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LETTERS TO THE EDITOR

Note: The editor is not responsible for opinions expressed in this department. All communications must be accompanied by the name and address of the writer.

A CORRECTION

Dear Editor: Might I, on behalf of the Council of the College of Nursing, Limited, ask you to contradict a statement made in your issue of July, 1918, to the effect that a very definite attempt was being made to enlist the sympathies of American nurses on behalf of the College, and that invitations had been made to individual American nurses to associate membership of the College. The Council of the College knows nothing whatever of the aforementioned. I have been informed, however, by a member of the College that a certain number of American nurses, who were impressed with the sound constitution of the College and its splendid aims, asked if they might not become members, or at least associates. They were informed that the College was registering only those nurses trained in the British Empire, and consequently their request could not be acceded to. Such a report as you have received is evidently one of a tissue of misrepresentations, being circulated by those opposed to the College of Nursing, Limited.

ALICIA LLOYD STILL.

Superintendent of the Nightingale Training School, Member of the Council of the College of Nursing, Limited.

CARE OF THE WOUNDED UNDER FIRE

(The following letter, written by a consulting surgeon with the American Expeditionary Forces abroad, was received in the office of the Army Nurse Corps and was sent to the JOURNAL by Miss Thompson as permission had been obtained for its publication, in part, with names eliminated.—Ed.)

The attack began about 12.10 a. m. on July 15, by a heavy bombardment of our lines. At 12.20 a. m. large high explosive shells began to fall near our advanced operating hospital at ———. All nurses and patients were at once transferred to the large abri. About one o'clock, the ambulances began to arrive and from that time a steady stream of wounded was received at the hospital. About one-thirty, our first operating room was opened and our first team called. A few minutes later two other teams were called, and by three o'clock we had six teams working in addition to the shock team in the resuscitation ward, in the post-operative wards and operating and sterilizing rooms. The work was carried on in an orderly manner, patients passing from the receiving ward to the shock ward, or to the X-ray room and from there to the operating rooms. About 3.20 a. m. shells began to fall nearer the hospital, passing directly over the operating building and exploding about fifty yards in front near the railroad tracks. The shells apparently came from two batteries, one heavy and one lighter, both long distance, high velocity, throwing high explosive shells. Between four-thirty and five-thirty, the bombardment continued and shells were falling just outside the hospital grounds every few minutes, but none exploded near the operating room until just before six, when one blew up our post-operative ward building about eight feet behind the operating rooms, killing two post-operative patients and wounding many other patients and personnel. From that time on, the shells continued to fall directly on the hospital area. Two other buildings were demolished, and a number exploded near the operating building and near the en-

trance to the abri. As soon as the post-operative ward was hit, all nurses and new patients were ordered to the abri, and the officers and enlisted men took refuge in the neighboring trenches. During this transfer several others were wounded and at least one stretcher patient was killed. About 6.30, after a consultation with the French Medicine Chief and another French officer, we decided that the place was untenable and an immediate evacuation was ordered, the patients, nurses, and teams to our other hospital at —; the Mobile Hospital and the two field hospitals to — where a site had been selected in advance and prepared for them. We started at once for — and reported to the Chief Surgeon of the French Army, who approved our action. About 11.30, patients began to arrive at — and although the operating tent was not ready and water connections not completed, four teams began operating shortly after two o'clock. We were also relieved somewhat by transferring about ninety cases to another Mobile Hospital whose plant was ready to receive patients just eight and one-half hours after they began to erect their tents in their new area, and ordering all surgical cases sent them until our congestion was relieved. If it had not been for the bombardment of our advanced hospital, and the necessity for immediate evacuation, with the time consumed in transferring it to a location thirty to forty kilometers in the rear, I am convinced that every patient could and would have received prompt surgical attention as we had sixteen surgical teams and adequate hospital accommodations. By Wednesday morning, 2 a. m., however, all cases awaiting operation had received surgical attention and from that time on, all admitted were immediately operated on. I wish also to report that during the trying period of seven hours while our advanced hospital was under fire, every officer, nurse and enlisted man did his full duty. There was not one instance of apparent fright or loss of self-control; and the entire personnel gave an admirable example of efficiency and good team work. The behavior of the thirty trained nurses was superb. Many of them had literally to be pushed out of the wards and operating rooms and compelled to go to the dugout. I might add that on the night of July 18, the Evacuation Hospital was bombed by a hostile aeroplane, two bombs being dropped near the tents, and on the nights of July 19 and 20, an enemy aeroplane passed over the hospital, flying low, and with his machine gun bombarded several of our ward tents. Fortunately no one was injured as most of the patients had been evacuated.

LETTERS FROM NURSES IN SERVICE

I.

Dear Editor: I had the pleasure of being detailed at a large hospital near Paris the first two weeks of my stay here and as it was after the big drive in July, we handled over 4000 wounded men. I shall never forget that first sight of our very own dear boys nor how brave and patient they were. Surely our young Americans are learning to take what comes without a murmur. Paris itself is like an immense American city, as far as Americans are concerned. One sees the stars and stripes, with the Red Cross flag, everywhere, though the setting is strange with the old historic buildings and the statues. I think we are all moved when we gaze on the statue of Washington, a feeling comes over us that we must do the best we can so that no slur may be put on the name we stand for. The work of the Red Cross is marvelous, there seem to be no details, small or great, that it does not know how to handle. One of the great problems is how to care for the children from the devastated districts and build them up after they have lived in a destitute condition for so long.

France

T. E.

II.

Dear Editor: You may have heard something about the Congress of Allied Women on War Service which was held here last week. It was not possible for me to attend the sectional meeting, but I did go to the dinner and the mass meeting. We nurses were very proud to have a member of our profession represent the American women on the programme following the dinner. We were particularly pleased because there were so many prominent American women present, and Miss Maxwell did look so well in her uniform, sitting among them at the speakers' table. A French band played the national hymn of each country as the speaker finished her address. Miss Bell, chief nurse of the Army Nurse Corps in France, and all the chief nurses of the base hospitals were here and held one or two meetings and there was a luncheon for them at the Pension for Red Cross nurses.

France

M. T. P.

IMPORTANT NOTICES, TOO LATE FOR CLASSIFICATION

The American Association for Study and Prevention of Infant Mortality will postpone its ninth annual meeting because of the prevailing epidemic.

Kansas.—THE KANSAS STATE BOARD OF NURSE EXAMINERS will hold an examination for state registration at the National Hotel, Topeka, December 27 and 28, 1918. Applications must be filed at least ten days before the examination, with the secretary of the Board. Those received after December 17 cannot be considered. Sister Mary Helena, Secretary, St. Barnabas Hospital, Salina.

Louisiana.—THE NEXT EXAMINATION OF THE Louisiana Nurses' Board of Examiners will be held in New Orleans, and in Shreveport, December 16, 17, and 18, 1918. For further information, apply to Dr. J. S. Hebert, Acting Secretary, 1121 Maison Blanche, New Orleans, La.

Michigan.—EXAMINATIONS WILL BE HELD BY THE State Board of Registration of Nurses on the 17th and 18th of December, 1918, in the House of Representatives at the Capitol, Lansing, Michigan. Harriet Leck, Secretary.

NURSING NEWS AND ANNOUNCEMENTS

NURSES' RELIEF FUND, REPORT FOR SEPTEMBER, 1918

Receipts

Previously acknowledged	\$3,542.58
Interest on bonds	40.00
Harriet Bartoo, Los Angeles, Cal.	3.00
Janette F. Peterson, chairman, California State Nurses' Association..	52.75
I. H. Odiorne, Jacksonville, Fla.	1.00
Louise M. Heller, Chicago, Ill.	1.00
Wisconsin State Nurses' Association	50.00
Hennepin County Registered Nurses' Association, Minneapolis, Minn...	25.00
Gisela C. Gechmann, Hartford, Conn.	1.00
Montana State Nurses' Association	25.00
From a visiting nurse	12.50
Ethel M. Stevens, San Francisco, Cal.	2.00
	\$3,755.83

Disbursements

Application approved, No. 1, 44th payment.....	\$10.00	
Application approved, No. 2, 33rd payment.....	5.00	
Application approved, No. 5, 20th payment.....	20.00	
Application approved, No. 6, 30th payment.....	15.00	
Application approved, No. 7, 23rd payment.....	15.00	
Application approved, No. 11, 20th payment.....	20.00	
Application approved, No. 12, 18th payment.....	10.00	
Application approved, No. 13, 9th payment.....	15.00	
Application approved, No. 14, 7th payment.....	15.00	
Application approved, No. 15, 3rd payment.....	15.00	
Exchange on cheques10	140.10
		\$3,615.73
13 bonds, par value	13,000.00	
2 certificates of stock	2,000.00	
5 Liberty Bonds	5,000.00	

October 1, 1918\$23,615.73

Contributions for the Relief Fund should be sent to Mrs. C. V. Twiss, Treasurer, 419 West 144th Street, New York City, and cheques made payable to the Farmers Loan and Trust Company, New York City. For information, address E. E. Golding, Chairman, 317 West 45th Street, New York City.

M. LOUISE TWISS, *Treasurer*.

PUBLICATIONS ON NURSING ISSUED BY THE COMMITTEE ON NURSING OF THE GENERAL MEDICAL BOARD OF THE COUNCIL OF NATIONAL DEFENSE

1. Opportunities in the Field of Nursing—47 pages.

This is the reprint of a pamphlet which was prepared some time ago for distribution among high school and college girls. It outlines in some detail the

purpose and character of nursing work, the qualifications and training required, the kinds of positions open to nurses with salaries and other details, the opportunities for advancement and the main essentials to consider in selecting a training school.

2. Nursing—a National Service—15 pages.

This is a war-time appeal to the young women of America to prepare for nursing service. It shows the need for student recruits, outlines the opportunities for service now and after the war, and gives advice regarding the kind of training and the way to get in touch with good nursing schools.

3. Bulletin of General Information for College Graduates Desiring to Enter Schools of Nursing—4 pages.

This little folder takes up certain questions regarding the credit allowed for college training in schools of nursing, the subjects which are commonly accepted as a basis for credit and some advice as to the best type of training school to enter.

4. State Sources of Advice and Information on Nursing—4 pages.

A list of names and addresses of nursing representatives in all the different states, from whom information regarding nursing schools and other local nursing matters may be secured.

5. The Nation's Call for Nurses—How American Women Can Meet it. Notes for Speakers—23 pages.

This gives in outline form, the main points to be presented by speakers who are enlisting student recruits for the nursing service.

6. A Message to Secondary School Principals and Teachers—8 pages.

An effort is made here to secure the coöperation of secondary school teachers and principals in placing the needs of the nursing service before high school students and recent graduates, in giving prospective nursing students the right kind of preliminary preparation in high schools, and in advising them regarding the training for their future vocation. Some suggestions are also given regarding teaching assistance which the high schools in the smaller communities might offer to the over-burdened nursing schools in their vicinity, especially in the preparatory period of training.

7. Preparatory Courses for Nurses in Colleges and Universities—a War Measure—26 pages.

This is an appeal to colleges and universities to assist the hospital training schools in preparing more nurses for national service. It outlines the plan of preparatory work as it was followed out in Vassar College this summer and makes a number of recommendations regarding the basis of coöperation between the higher educational institutions and nurses' training schools.

Single copies of all these pamphlets can be secured free, on application to the Committee on Nursing, Council of National Defense, Washington. They may be secured in quantities at cost price.

American Association for Study and Prevention of Infant Mortality.—The ninth annual meeting will be held at Asheville, N. C., November 11-14. The programme is being arranged with special reference to war needs.

ARMY NURSE CORPS

Appointments.—Katherine F. Burns, Eva F. McLean, assigned to duty with U. S. Army Post Hospital, A. Aberdeen Proving Ground, Md. Anjeanette Wager, assigned to duty at U. S. Army Post Hospital, Fort Andrews, Mass. Esther C.

Benson, Ida M. Luke, Ida M. Barwick, Mildred A. Jackson, Mattie Harrison, Emilie B. Curl, Sarah E. Hathway, Lela J. Hauger, Lillian Hamilton, Dorothea A. Daniels, assigned to duty at U. S. Army General Hospital No. 19, Azalea, North Carolina. Ella B. Smith, Lucile B. Boundy, assigned to duty with U. S. Army General Hospital, Fort Bayard, N. M. Sarah E. Stickney, Helena E. Reh; assigned to duty at U. S. Army Base Hospital, Fort Benjamin Harrison, Ind. Ethel Riley, Aline L. Adrot, Sara I. Trafford, Minnie Tuffin, assigned to duty with U. S. Army General Hospital No. 19, Biltmore, N. C. Helen Maur, assigned to duty with U. S. Army Base Hospital No. 2, Fort Bliss, Tex. Edna F. Ray; assigned to duty with U. S. Army General Hospital No. 11, Cape May, N. J. Helen L. Osterheldt, Myma J. Taylor, Mildred Croswell, assigned to duty with U. S. Army Base Hospital, Camp Cody, Deming, N. M. Nelle M. Bream, Frances MacKey, assigned to duty with U. S. Army Post Hospital, Camp Colt, Gettysburg, Pa. Nora E. Barnes, Helen L. Cronk, Jennie Dahl, Helena Murray, Agatha C. Darcy, assigned to duty with U. S. Army Base Hospital, Camp Custer, Battle Creek, Mich. Winifred R. McGuire, Mabel Folker, assigned to duty with U. S. Army Base Hospital, Fort Des Moines, Iowa. Agnes J. Trull, Catherine A. Murphy, Grace D. Baird, Margaret L. Magnier, Harriet P. Small, Florence M. Dick, Idora B. Callahan, assigned to duty with U. S. Army Base Hospital, Camp Devens, Ayer, Mass. Anna C. Lockerby, Venetta V. Kahler, Grace B. Hinckley, Marie E. Logan, Jane E. Rafferty, Helen L. Bloomfield, Emma Williams, Anna E. O'Neill, Maide G. Campbell, Teresa Fitzgerald, Mary A. Meely, Mildred P. Eppelsheimer, Katharine J. Irvine, Martha B. Crow, Katharine Kane, Nellie Ward, Margaret M. Slahan, Regina G. Kelly, assigned to duty at U. S. Army Base Hospital, Camp Dix, Wrightstown, N. J. Emma C. Mandehr, Maude M. Osborne, assigned to duty at U. S. Army Base Hospital, Camp Dodge, Herrold, Iowa. Susan P. Staufer, assigned to duty at U. S. Army Base Hospital, Camp Doniphan, Fort Sill, Okla. Elizabeth M. McLaughlin, assigned to duty at U. S. Army Post Hospital, Fort Douglas, Utah. Edna L. Ellis, Lillian E. McKee, Lillian M. Langdon, Frances McKenna, assigned to duty at U. S. Army Base Hospital, Edgewood Arsenal, Edgewood, Md. Mildred M. Pomeroy, Bessie E. Linn, Beatrice E. Hughes, assigned to duty at U. S. Army Debarkation Hospital No. 1, Ellis Island, N. Y. Ellen Callahan, Margaret Driscoll, Katherine E. Gallagher, Julia M. Cronin, Mary A. Maxwell, Harriet M. Starp, Ada Sturgis, Florence D. Robinson, assigned to duty with U. S. Army Debarkation Hospital No. 2, Fox Hills, N. Y. Marie McLaughlin, Mary M. Pilley, assigned to duty at U. S. Army Aeronautical Supply Depot and Concentration Camp, Garden City, L. I., N. Y. Eleanor Hayes, Katherine W. Kiefer, Susanne S. Burger, Sara E. Pryor, Anne M. Kistner, Hilda M. Farr, May F. Fitzgerald, Nellie McGrath, Ellen P. McFadden, Rose M. Pendergast, Alice H. MacPhee, Claudine F. Marlot, Martha S. Wolff, Mae T. MacKinney, Cornelia A. Henderson, Edna M. Houck, Grace E. Moulder, Mary B. Verner, Ida C. Stieglitz, assigned to duty at U. S. Army General Hospital No. 1, New York, N. Y. Alice R. Moore, Bertha V. Green, Alice G. Boyd, Priscella L. Cumpson, Edith D. Abbott, Senie M. DeVanie, Marie D. Cooper, Grace C. McCullough, Beatrice E. Cooney, Rose Hardy, Elsie M. Helgren, Alice E. Finegan, Florence M. Bands, Anna V. Free, assigned to duty at U. S. Army Base Hospital, Camp Gordon, Chamblee, Ga. Lena P. Kern, Bessie Laurent, Clara M. Noyes, Sarah Ravwitch, Sue B. Wyatt, Pauline E. Lutomske, Susanna F. Sell, Edna F. Wilson, Lydia M. Kuntz, Evelyn Hardy, Mary B. Beal, Evelyn Falkenburg, assigned to duty at U. S. Army Base Hospital, Camp Grant, Rockford, Ill. Rose E. Denton, Bregetta M. Benonis, Frances E. Cusack, assigned to duty at U. S. Army Base Hospital, Camp Greene, Charlotte, N. C. Helen M. Stroening, assigned to duty at U. S. Army Post Hospital, Fort

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Hamilton, N. Y. Dorothy Potter, assigned to U. S. Army Embarkation Hospital No. 1, Hoboken, N. J. Vivian P. Hackett, assigned to duty with U. S. Army and Navy General Hospital, Hot Springs, Ark. Helen F. Ridge, Elizabeth Hill, Anna M. Osborn, Beulah E. Fairfax, assigned to duty at U. S. Army Base Hospital, Camp Jackson, Columbia, South Carolina. Inez E. Shaw, assigned to duty at U. S. Army Quartermaster's Supply Depot, Jeffersonville, Indiana. Martha E. Andrews, Grace Burkhalter, assigned to duty at U. S. Army Base Hospital, Camp Joseph E. Johnston, Jacksonville, Fla. Eda E. Heeg, Theresa W. Stevenson, Kate Leonard, assigned to duty at U. S. Army Base Hospital, Camp Kearney, Cal. Inez H. Wiley, Clara A. Burke, Rachle Walker, Kathryn Schurr, assigned to duty at U. S. Army General Hospital No. 9, Lakewood, N. J. Edith M. Emory, Margaret E. Young, Elsie D. Jameson, Caroline M. Heiman, assigned to duty at U. S. Army Base Hospital, Camp Lee, Petersburg, Va. Carrie E. Beck, Esther A. Brown, Grace Haehulen, Hazel L. Hogston, assigned to duty at Letterman General Hospital, San Francisco, Ca. Mary J. McLennan, Ida I. Rettig, Ruth L. Perlich, Theresa DeWitt, Margaret E. Canning, Laura F. Stevens, Emma Peery, Alice M. Lyddon, Wayne Garrick, Adeline McCormick, assigned to duty at U. S. Army Base Hospital, Camp Lewis, American Lake, Wash. M. Rhey Dumars, Anna K. Hanson, Anna M. Johnson, Rhoda V. Churchill, Frances E. Wilkinson, Grace M. Oard, Nora Long, assigned to duty at U. S. Army Base Hospital, Camp Logan, Houston, Tex. Clara M. MacQuarrie, assigned to U. S. Army Post Hospital, Fort Logan, Col. Emma E. Campbell, Lilly H. Allen, Elsie Dearing, assigned to duty at U. S. Army Base Hospital, Camp McClellan, Anniston, Ala. Beatrice M. Fuller, assigned to duty at U. S. Army General Hospital No. 2, Fort McHenry, Md. Mabel R. Holmes, Emma V. McCuller, Annie Barry, Sybil M. Jones, Agnes M. Browne, Mary T. Russell, Nelle C. Grimsley, assigned to duty at U. S. Army General Hospital No. 6, Fort McPherson, Ga. Florence Dawson, Irene G. Clark, assigned to duty at U. S. Army General Hospital No. 17, Markleton, Pa. Bessie H. Yard, Leola Bennett, Madeline Putman, Effie J. Taylor, Rosanna Gill, Ethel A. Bean, Mary M. Corbette, Laura M. Mygren, Ella Born, Belle Rankin, assigned to duty at U. S. Army Base Hospital, Camp Meade, Admiral, Md. Adaline P. D. Trask, Blanche E. Martin, Eva B. Dexter, Margaret M. Moore, Teckla O. Nelson, Agnes M. Walsh, Emily B. Bowers, Catherine M. Gildea, Birdie M. Kelly, Marcela G. Gaffney, Eleanor Cassidy, Lena Weissler, assigned to duty at U. S. Army Embarkation Hospital, Camp Merritt, New Jersey. Anna M. Norton, Nellie Cudahy, Alice Dunn, Hilda Detlof, Frances M. Smith, Elizabeth M. Goodman, Sarah F. McGrath, Gertrude A. Daye, assigned to duty at U. S. Army Base Hospital, Camp Mills, Mineola, Long Island, N. Y. Mary E. O'Hara, Louise M. Stephan, Mary R. Lovelace, assigned to duty at U. S. Army General Hospital No. 16, New Haven, Conn. Mary M. Schoeppel, Mary McMahon assigned to duty at U. S. Army General Hospital No. 14, Fort Oglethorpe, Ga. Anna M. Grassmyer, Betty L. Stevenson, Sara I. Stevenson, assigned to duty at U. S. Army General Hospital No. 5, Fort Ontario, N. Y. Hazel M. Scott, assigned to duty at U. S. Army General Hospital No. 8, Otisville, N. Y. Rebecca T. Steen, assigned to duty at U. S. Army Post Hospital, Payne Field, West Point, Miss. Margaret Reynolds, Mary J. Batsford, Theresa Moore, assigned to duty at U. S. Army Post Hospital, Plattsburg Barracks, N. Y. Ethel V. Woodward, assigned to duty at U. S. Army General Hospital No. 22, Richmond, Va. Nettie E. Brock, Aura Patton, Lillian E. Oakes, Marie L. Berriex, Helma P. Parsons, assigned to duty at U. S. Army Base Hospital, Fort Riley, Kan. Iola Burke, Laura H. Egan, Jennie V. Henley, Myrtle L. Campbell, Anita Williams, assigned to duty at U. S. Army Base Hospital No. 1, Fort Sam Houston, Tex. Jeannie M. Palmer, Mary

J. Hileman, Adele E. Smith, Ethel E. Rahauser, assigned to duty at U. S. Army Base Hospital, Camp Sevier, Greenville, S. C. Ella M. Weeks, Ida Mahaffey, Anna F. Radovich, Hilga T. Nelson, Minnie Kirkpatrick, Vincent C. Cromwell, Anastasia S. Grabowska, Lucille Burrow, assigned to duty at U. S. Army Base Hospital, Camp Shelby, Hattiesburg, Miss. Anna B. Griffin, Bertha L. Blake, assigned to duty at U. S. Army Base Hospital, Camp Sherman, Chillicothe, Ohio. Selma C. Martinson, Mary O. Johnson, assigned to duty at U. S. Army Post Hospital, Fort Snelling, Minn. Catherine Brady, Marie A. Huber, Elizabeth J. Lundy, Mae B. Toadwin, Anna M. Jewell, Hilda V. Blom, Hilda W. Griffiths, assigned to duty at U. S. Army Embarkation Hospital, Camp Stuart, Newport News, Va. Elizabeth Boda, Clara M. Loewe, Gertrude E. Mountain, Susan A. Loftus, Florence C. Ahlson, Mary Wittenberg, Charita Hendricks, assigned to duty at U. S. Army Base Hospital, Camp Taylor, Louisville, Ky. Wilhelmine A. Lute, assigned to duty at U. S. Army Base Hospital, Camp Travis, Fort Sam Houston, Tex. Louie M. Stacy, Anna Christensen, Irene K. Helf, Edna L. Caley, Evelyn C. Johnston, Amelia Winsor, Ann Thomas, Anna M. Maher, Amelia J. Elling, Ruth Sheirtcliff, Ruth Ludham, assigned to duty at U. S. Army Base Hospital, Camp Upton, N. Y. Louise F. Arnold, Caroline V. McGlinchy, Frances C. Graves, Martha Oakes, Kathryn Maher, Edith I. Ferguson, Marguerite E. Linsley, Hazel G. Butler, Katherine G. McDonell, Margaret V. Del Rosso, Rosetta Rice, Mary Keehan, Anna D. Kelly, Anna E. Ryan, Alice M. Holt, Charlotte F. MacAlister, Mary I. Webster, Chloe Howard, Nettie S. Anderson, Anne B. Hopkins, Lynda E. Berkey, assigned to duty at U. S. Army Base Hospital, Camp Wadsworth, Spartanburg, S. C. Mary A. Dietz, Harriet W. Balcom, Eva E. Boyd, Margaret Loder, Mary J. Ross, M. Virginia Ryan, assigned to duty at Walter Reed General Hospital, Takoma Park, D. C. Elizabeth P. Dillon, Kathleen Buckler, assigned to duty at War Emergency Dispensary, Washington, D. C. Otilia Goldsmith, Hannah M. Sheehan, Evelyn M. Gallaher, assigned to duty at U. S. Army General Hospital No. 18, Waynesville, N. C.

Transfers.—To U. S. Army General Hospital No. 19, Azalea, N. C.: Florence Standish, with assignment to duty as Chief Nurse. To U. S. Army Post Hospital, Fort Adams, Rhode Island: Anjeanette Wager. To U. S. Army Post Hospital, Aviation Repair Depot, Dallas, Tex.: Elizabeth M. Hitt. To U. S. Army General Hospital, Fort Bayard, N. M.: Agnes R. Glenn. To U. S. Army Base Hospital, Camp Beauregard, Alexandria, La.: Mildred A. Knapp. To U. S. Army Base Hospital, Camp Bowie, Fort Worth, Tex.: Fredelia Dixon, with assignment to duty as Chief Nurse. To U. S. Army General Hospital No. 21, Denver, Col.: Esther Allison Brown. To U. S. Army Base Hospital, Camp Dix, Wrightstown, N. J.: Carolyn Milligan. To U. S. Army Post Hospital, Fort Douglas, Utah: Angeline L. Staples, with assignment to duty as Chief Nurse. To U. S. Army Base Hospital, Camp Gordon, Chamblee, Ga.: Martha Oakes, with assignment to duty as Chief Nurse. To U. S. Army Base Hospital, Camp Greene, Charlotte, N. C.: Betty Crutchfield, Fleta A. Lynch. To U. S. Army Embarkation Hospital No. 1, Hoboken, N. J.: Elizabeth J. Kenny. To U. S. Army Post Hospital Habelhurst Field, Mineola, Long Island, N. Y.: L. Maude Bowie, with assignment to duty as Chief Nurse. To U. S. Army Post Hospital, Kelly Field, South San Antonio, Tex. Mary E. Rayner. To U. S. Army Post Hospital, Langley Field, Hampton, Va.: Eva Maude Sadler, with assignment to duty as Chief Nurse. To U. S. Army Base Hospital, Camp Lee, Petersburg, Va.: Florence B. Tobin. To U. S. Army Base Hospital, Camp Logan, Houston, Tex.: Agnes J. Trull, with assignment to duty as Chief Nurse, Elizabeth D. Holmes. To U. S. Army Post Hospital, Camp Morrison, Va.: Winifred S. Flaherty. To U. S. Army Post Hos-

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pital, Rock Island Arsenal, Rock Island, Ill.: Anna G. Roberts, with assignment to duty as Chief Nurse. To U. S. Army Base Hospital, Fort Riley, Kan.: Nettie Brock, with assignment to duty as Chief Nurse. To St. Mary's Hospital, Rochester, Minn.: Florence C. McCabe, with assignment to duty as temporary Chief Nurse, Ethel C. Matlick, Helen M. Amonn, Agatha A. Whitman, Gevevieve A. Dynes, Margaret M. Maag. To U. S. Army Base Hospital No. 1, Fort Sam Houston, Tex.: Ethel M. DeGarmo. To U. S. Army Base Hospital, Camp Taylor, Louisville, Ky.: Margharita D. Duke. To U. S. Army Base Hospital, Camp Upton, Long Island, N. Y.: Louise F. Arnold. To U. S. Army General Hospital No. 18, Waynesville, N. C.: Anne McNulty. To American Expeditionary Forces, Group B (service in Europe): Margaret M. Healey. To Nurses Replacement Unit No. 1: Maud L. Hedges, with assignment to duty as Chief Nurse, Rosslyn Chambers, Carrie M. Kinley, Ida M. Martinson, Mary B. Beal, Cecile J. Stoessel, Mary H. Lindley, Mary A. Dowd, Helen F. Halfpenny, Ada M. Harper, Millicent B. Longfeld, Margaret Ella Taylor, Jessie Zimmerman. To Nurses' Replacement Unit No. 2: Mary P. Young, with assignment to duty as Chief Nurse, Agatha C. Darcy, Elizabeth Noel, Karen M. Swarva, Olive R. Conrad, Alice F. Fadrowsky, Agnes Farley, Harriett C. Peck, Olive A. Plank, Sarah W. Smith, Agnes M. Weymiller, Essie H. Adams, Grace A. Hubbard, Mary B. McPake, Emily Robinson, Myrtle Quiett, Estelle F. Birks, Mary I. Campbell, Glorinah M. Lebens, Ethel Roe. To Nurses' Replacement Unit No. 3: Augusta L. Schweiserhof, with assignment to duty as Chief Nurse, Virginia P. McFarland, Ethel U. Connolly, Martha F. Stewart, Jessie A. Bemis, Nelle Coad, Beatrice Days, Mary E. Goth, Fay M. Hummon, M. Evelyn Marshall, Donna S. Maxwell, Carrie Noben, Inga J. Qually, Mildred Snow, Clara Wyse, Emma Gruel, Ethel MacLaren Gordon, Evelyn Falkenberg, Isabel Nichols, Augusta A. Rogoshaska, Olga C. Nelson, Kathleen Rives, Clara E. Robey, Adeline F. Dennick. To Nurses' Replacement Unit No. 4: Maude Parson, with assignment to duty as Chief Nurse, Kathryn A. Graham, Margaret Holmes, Grace M. Oard, Elizabeth McLaughlin, Brosia C. Dawson, Agnes T. Dougherty, Cora Elinor Ray, Isabelle L. Byrne, Blanche M. Coleman, Mabel C. Cox, Anna M. Heywood, Janet Russell Jarvis, Ruth C. Lindberg, Ethel M. Siple, Helen L. Cronk, Margaré A. Hoagland, Anna B. Bradley, Anna Brennan, Emily S. Tanquist. To Nurses' Replacement Unit No. 5: Anna C. Lockerby, with assignment to duty as Chief Nurse, Katherine F. Porter, Kathryn M. Noonan, Helen C. Berry, Anna M. Little, Lorena M. Deinstadt, Ivy Coe Frost, Edith L. Huffman, Helen C. Manley, Florence E. Miller, Margaret Topping, Bertha M. Hughes, Helen Walker, Lucie Zurcher, Ann D. Belt, Grace Haehnlen, Virginia Hedges, Dorpthea L. Kapphahn, Margaret Macinnes, Mary Ethel K. Mellor. To Nurses' Replacement Unit No. 6, Julia E. Clark, with assignment to duty as Chief Nurse, Lucy A. Donnelly, Marjorie A. Keller, Ella W. Pease, Florence B. Tobin, Jean P. Dennis, Jennie Dahl, Alice A. Haslett, Helena Murray, Minnie Mae Matts, Sallie Hubbard Stamps, Myrtle M. Morland, Mabel H. Kellaway, Jennie E. Leber, Mary S. Lowe, Bridget A. Monaghan, Edith M. Quillen, Marion A. Waring, Elizabeth A. Snyder, V. Bernice Kaulum, Eula L. McCarty, Irene M. Marcoux, Mary H. Bock, Margaret J. Bakken, Mary Olive Johnson. To U. S. Army Base Hospital No. 62 (service in Europe): Florence M. Biddle, with assignment to duty as Chief Nurse, Grace E. MacDougall, Nelle C. McNeill, Minnie S. Hodgins, Ina E. Klinefelter, Effie L. Johnson, Cora E. Piper, Lillian B. Snider, Anna L. Witt, Emily Gibson, Rose L. Lewis, Clara H. Urmson. To U. S. Army Base Hospital No. 63 (service in Europe): Nellie V. Close, with assignment to duty as Chief Nurse, Beatrice R. Flinn, Jessie L. Gaisford, Clara C. Hoffman, Mary J. MacGillivray, Louise A. Rast, Stella B. Bartlett, Kathryn Bennett, Margaret M. Courtney, Mary M.

Hennessy, Della Anderson, Effie Barnett, Lovilla Cedergren, Ruth Fredstrom, Marie F. Gates, Myrtle E. Griffin, Ruth C. Jacobson, Elizabeth G. Lowry, Anne M. Slorsh, Frances E. Speller, Julia D. Vleck, Marie Kenny. To U. S. Army Base Hospital No. 93 (service in Europe): Katherine C. Hannan, with assignment to duty as Chief Nurse, Beulah A. Bale, Mary E. Byrne, H. Isabelle Hughs, Philinda M. Johnson, Alice T. Maddock, Mary T. McGuire, Mary Patrick, Louise M. Young, Gertrude R. Ward, Grace E. Garland, Elin M. Blom, Jimmie Hamby, Elizabeth F. Redmond, Bessie Booguah, Katherine F. Burke, Jennie E. Farrington, Ebba Fritzsche, Alexie B. Gillis, Louis M. Henry, Veronica Monaghan, Grace E. Moulder, Ida C. Stieglitz, Mary B. Verner, Vera L. Keagle, Laura Anderton, Annie Nugent, Mary F. Hayden, Elizabeth I. McDermott, Anna M. Maguire, Hannah T. Shannon, Mary E. Palmer. To Psychiatric Replacement Unit No. 2: Pauline F. Doe, with assignment to duty as Chief Nurse, Mae M. Hudson, Lillian Swann, Charlotte Mackenzie, Elsie M. Seidel, Georgina Nis, Shirley W. Bostrand, Margaret Cousins, Ida W. Danielson, Mazie E. Carback, Adelaide Gmeinder, Margaret L. Humphrey, Julia McAuliff, Luella M. MacLean, Theresa Moore, Helen E. Root, Clara B. Waldron, Rose M. Donohue, Elizabeth D. Grimes.

Discharges.—Katherine F. Crowley, Geneva R. Drosta, Nellie Gallup, Isabel Luella Glendinning, Julia Herron, Laura O. Hale, J. Katharine Harrold, Edna Pearl Jones, Louise Karnes, Laura F. Lake, Emma C. Macdermaid, Bertha F. Mears, Annie Josephine O'Keefe, Teresa Ellen Roche, Georgiana M. Smith, Herminie Turcotte, Florence E. Woodbury.

RESERVE NURSES, ARMY NURSE CORPS

Assignments.—To U. S. Army Post Hospital, Aberdeen Proving Grounds, Aberdeen, Md.: Leila E. Saunders, Susie L. Rodgers. To U. S. Army General Hospital No. 19, Azalea, N. C.: Nellie M. Barry, Marie T. Hoel, Ethel I. Hipps, Christine Roberts, Elizabeth F. Murray, Ida M. Aandall, Mae L. Cowdrick, Martha Hanrahan, Rose C. Wagner, Elsie D. Peters, Eva L. Wakefield, Anne C. Norcross, Nellie S. Elder, Evelyn J. Davis, Lisetta Korb, Bessie A. Lyons, Frances M. Bourns, Mary M. Merck, Bessie D. Scott, Augusta A. Smith, Ruth Lenement, Marjorie Chrisman, Gertrude T. Koons, Isabel Moffatt, Bertha McNickles, Jessie M. McCamron, Minnie F. Morton, Sara P. Cooper, Agnes H. Harrison, Margaret R. Quinn. To U. S. Army General Hospital, Fort Bayard, N. M.: Gladys Budlong, Juanita R. Hartner. To U. S. Army Post Hospital, Fort Barrancas, Fla.: Florence A. Reichelderfer. To U. S. Army Base Hospital, Camp Beauregard, Alexandria, La.: Julia D. Loftus, Matilda V. Braun, Lydia E. Magnuson, Myrtle H. E. Johnson, Svea E. Swenson, Lieuthena H. Anderson, Mae H. Young, Ida Duffey, Florence E. Mason, Kathryn Woolf, Mabel R. Marvin, Nora G. Freeman, Josephine M. Berge, Dezzie R. Bowden, Bobbie Lee Bennett, Mary T. Maher, Mary E. Lightfoot. To U. S. Army Base Hospital, Fort Benjamin Harrison, Ind.: Nancy L. Marsh, Nona G. Kaster, Martha C. Snyder, Golda A. Turley, Violette I. Wehrle, Margaret L. Daniel, Anne E. Cox, Ruth A. Philbrook. To U. S. Army General Hospital No. 12, Biltmore, N. C.: Charlotte E. Jones, Florence I. Crispin, Elizabeth M. Nicklin, Margaret J. Leonard, Mary E. Armstrong, Ethel M. Fuss. To U. S. Army Base Hospital No. 2, Fort Bliss, Tex.: Helen Burleigh, Pearl C. Barday, Mabel Rorick, Mary A. Hanfield. To U. S. Army Base Hospital, Camp Bowie, Fort Worth, Tex.: Rose Kaiser, Essie J. Dale, Helen McAlonan, Delia Higgins, Nell Hurley, Jessie R. Emrie, Matilda F. Paskanot, Jessie R. Durand, Bertha R. Bing, Marie H. Mullarky, Veronica R. Lynch, Lucille Porter, Susan B. Bosold, Dora J. Bradwell, Jack Carr, Edith A. Emmond, Elsa A. Odman, Cecelia K. Bartlett, Mary H. Hinde, Edna M. Riederer, Caroline A. Arthur, Hilda Fuller,

Helen
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Helen M. Sargent, Elsa A. Odman, Olive P. Kernen, Bessie L. Houzvicks, Catherine Reynolds, Isabelle M. Martin, Mollie Pfanenstiel, Edna S. Oharood, Nellie M. Allen, Katharien W. Vance, Helen M. Ward, Elizabeth Wortman, Alta Prichard, Sarah McNulty, Florence L. Henderson, Fannie E. Whiteman, Madeline R. Thompson, Mary A. Madden, Margaret Meyer, Edythe A. McPhee, Margaret Frazier, Nona O. Tabb, Gladys M. Neidie, Ellanora H. Miller, Catharine Gooss, Lillian Illilay. To U. S. Army Post Hospital, Brooks Field, San Antonio, Tex.: Elsie C. Farnsworth. To U. S. Army General Hospital No. 11, Cape May, N. J.: Ida A. Champayne, Hannah L. Whalen, Josephine A. Phelps, Mary E. Moriarty, Winifred Cline, Hattie I. Wright, Ruth G. Bleacher, Clara M. Bennett, Margery G. Vale, Ethel Lindborn, Bertha L. Fisher. To U. S. Army Post Hospital, Call Field, Wichita Falls, Tex.: Dora N. Kothmann, Mary B. Cardwell. To U. S. Army Post Hospital, Carruthers Field, Fort Worth, Tex.: Maggie A. Joyner. To U. S. Army Post Hospital, Chanute Field, Rantoul, Ill.: Anne Anderson. To U. S. Army Base Hospital, Camp Cody, Deming, N. M.: Sue E. Brown, Anna P. Hart, Flora Culver, Bertha A. Nipper, Anna M. Henry, Rose E. Lieb, Jennie F. Franklin, Ruth E. Tarpey, Sara E. Bailey, Mabel C. Darrington, Muriel I. Eady, Olive Openshaw, Emma M. Franklin, May E. Richards, Sylvia A. Montgomery. To U. S. Army Base Hospital, Camp Custer, Battle Creek, Mich.: Lillian Bagley, Anna T. Fuerstenberg, Dorothy A. Blodgett, Minnie Peter, Florence A. Foley, Winifred G. Hickey, Helen Bapty, Abbie Stevens, Flora Portwine, Marguerite McKittrick, Hazel E. Bryant, Margaret C. Barry, Mayme E. Noonan, Blanche M. Kirch, Edith L. Jewell, Olga A. Hanson, Bernadette M. Hamlin, Helen Hammar, Erma A. Rumberger, Selma A. Schwake, Rose E. Zora, Louise Zorn, Bessie J. Delano, Elizabeth Hughes, Diana D. Dodds, Anna C. Johnson, Aleta E. Manning, Ethel L. DeVries, Mary J. McGovern, Helen C. Holhan, Emma Walters, Phyllis Weston, Mary McLean, Harriet E. Little, Annette Clements, Edith C. Jones, Hattie Bruce, Iza E. Chase, Eva Thurnblad, Selene Carlson, Margaret E. Bender, Harriet T. Chadwick, Cordelia M. Roberts, Lena T. Grover, Weta Hawks, Valentine M. Gontero, Anna M. Simones, Marie E. Broker, Maude L. Dally, Susie St. Martin, Helen I. Goodison, Alta Smith. To U. S. Army Base Hospital, Fort Des Moines, Iowa: Ellen E. Johnston, Sibyl C. Davis, Grace E. Scott, Bertha O. Larson, Anna Efta, Hilda P. Halfpap, Ione I. Canine, Mabel I. Swanson, Helen Samuelson, Ida H. Darus, Edythe N. Gederberg, Delia B. Green, DeElda Kinson, Bessie R. Cobban, Clara K. Emerson, Mary A. Lennan, Mary A. Davenport, Elizabeth Donoghue, Susie E. Grace, Dena G. Walsh, Nell E. Verink, Gertrude L. Portel, Inez Millen, Amanda J. Hale, Minnie E. Bea, Catherine McKay, Augusta Peterson, Hazel Z. Ogle, Marietta E. Johnson. To U. S. Army Base Hospital, Camp Devens, Ayer, Mass.: Margaret L. Minehan, Isabel Perkins, Marjory Cabot, Catherine Campbell, Gertrude Labbitt, Mary E. Grady, Alma E. Johnson, Fayette A. Smith, Gladys A. Greene, Sarah I. Murgrave, Nathalie Hill, Alice M. Young, Deccadie Duval, Edna P. Barnes, Elizabeth Sennewald, Annette L. Munro, Geneva E. King, Maud A. Munn, Ruth P. Rigby, Anna M. Carolan, Lillian Willshaw, Nellie C. Thompson, Mary E. Mattern, Eva M. McNerney, Catherine Fettig, Claire A. Ledden, Gertrude E. Hartman, Nelle M. Case, Kathryn Townsend, Catherine M. Fogarty, A. Gertrude Steates, Winifred E. Pearce, Coral M. Page, Gertrude Colleary, Annie M. Thyng, Catherine Swella, Hanna O'Dea, Georgina L. Wink, Aagat H. Grubbe, Bessie B. Granger, Mary Magdalena Orr, Gertrude Fitzgerald, Marjorie M. Macrae, Helen J. McCormick, Margaret A. Gaughan, Kathleen L. Hartzell, Evangeline Smith, Evelyn Parsons, Anna M. Reilly. To Aviation Concentration Camp, Camp Dick, Dallas, Texas: Alice C. Johnson, Mabel Reid. To U. S. Army Base Hospital, Camp Dix, Wrightstown, N. J.: Helen F. Buck, Emily

D. Hammond, Mary K. Peterson, Lillian B. Rote, Wenonah Durant, Mabel R. Duryea, Mary M. Drabeck, Emily M. Armstrong, Elizabeth A. Malone, Gertrude Mary Gruver, Irma L. Edwards, Helen M. Alesander, Frances L. Yinger, Violet R. Kuller, Mary E. Carrow, Ida C. Gant, Maude White, Helen M. Hennessey, Katharine M. Cornwell, Mildred E. Kjellander, Mabel T. McGuire, Ellen D. Voorhis, Mary E. Symonds, Susie McFarland, Susan Milne, Zoe L. Hanna, Amelia Gumper, Clara E. Callahan, Mary A. Kullman, Martha McGarr, Catherine J. McGarr, Margaret E. Butcher, Madalon L. McCarty, Hannah E. Moran, Martha Dinner, Emma Gallinger, Annie Stephens, Phyllis Higinbotham, Helen F. Donovan, Rose M. Wood, Grace M. Heidel, Vivian Morgan, Cora H. Randall, Viola McIlwee, Pauline Brining, Mae A. Linden, Harriet E. Converse, Mary P. Haney, Sadie J. Vaughn, Harriet Clarke Knox, Alice V. Greer, Kathryn Webster, Catherine V. Collins, Theresa V. Collins, Nora C. Coughlin. To U. S. Army Base Hospital, Camp Dodge, Herrold, Iowa: Alice M. Canvin, Josephine Dunschen, Wilamina M. Fischer, Minnie E. Arndt, Elizabeth F. Bosing, Elsie Jerrison, Selma E. Thanks, Otilia E. Root, Myrtle M. Rimert, Amelia Pretti, Emily M. Schmitz, Margaret Whalen, Golda E. Hartman, Dorothy E. Sullivan, Delma C. Gregerson, Esther O. Johnson, Ruby D. Ripley, Grace E. Pulley, Ruth A. Pearson, Florence E. Byrnes, Lila M. Heath, Anna M. Lorch, Saba Ball, Golda M. Knott, Harriet M. Tucker, Claudia Achtenhagen, L. Jessie Sprecher, Cadd R. Hawkins, Margaret L. McAthie, Harriet M. Kuenin, Isabel S. McHarg, Sarah M. Hedges. To U. S. Army Camp Hospital, Douglas, Ariz.: Alice C. Baker, Margaret S. Kelley, Evalyn Ryan. To U. S. Army Post Hospital, Fort Douglas, Utah: Edna M. Snyder, Elsie L. Weeks, Carolyn E. Weeks, Mary McCartan, Beatrice M. Reichart. To U. S. Army Base Hospital, Edgewood Arsenal, Md.: Helen M. Magrath, Ethel O. Leach, Vivian F. Perkins, Annie M. Shattuck. To U. S. Army Debarkation Hospital No. 1, Ellis Island, N. Y.: Helen A. Bedford, Edith M. Holmstrom, Mildred Wiley, Mary A. Winn, Emma L. McCombs, Grace A. Pengilly, Sarah L. Staples, Lizzie W. Grant. To U. S. Army Base Hospital, Camp Eustis, Lee Hall, Va.: Mary M. Richardson. To U. S. Army Debarkation Hospital No. 2, Fox Hills, Staten Island, N. Y.: Anna B. Northup, Jessie N. Steele, Clara B. Steele, Mary R. Nicklas, Nell Mahaney, Grace V. Cook, Charlotte J. Langenbach, Priscilla Roberts. To U. S. Army Base Hospital, Camp Fremont, Palo Alto, Cal.: Cora A. Paessler, Helen Gunn, Ethel E. Everton, Freda Russ. To U. S. Aeronautical Supply Depot and Concentration Camp, Garden City, Long Island, N. Y.: Sadie M. Willette, Beatrice E. Forster, Dorothy Kinnaird. To U. S. Army Base Hospital, Camp Gordon, Chamblee, Ga.: Sadie V. Meadows, Cora Davis, Louise Bruch, Florence Watson, Maude E. Wise, Frances Yeamans, Anna L. Anderson, Josephine MacRae, L. Ethel Griffith, Barbara Marugg, Margaret E. Bolton, Mary M. Kay, Anna E. Dixon, Goldie Gillman, Mae M. Moore, Margaret E. Gallagher, Nellie A. Merz, Mabel E. Anibal, Rose Bassinger, Regina C. Lawlor, Juel E. Paddon, Margaret E. Hyde, Lillian W. Moore, Della C. Farrell, Bertha Wheelock, Ruth G. McDonald, Elsie A. Pinder, Elizabeth McMullen, Vivian C. Everhart, Lou W. Dragoo. To U. S. Army Base Hospital, Camp Grant, Rockford, Ill.: Helen A. Johnson, Hulda M. Jacobson, Clara Gasser, Elsie P. Wendt, Florence E. Daly, Theresa Dethloff, Signe V. Peterson, Ida R. Schantz, Marie R. Plock, Minnie J. Hallgren, Florence I. Nicoll, Hilda G. Stickley, Esther R. Henderson, Laura O. McGarth, Gertrude M. Wiand, Sophia Stapula, Ellen Bennett, Catherine Sullivan, Marie Schmidt, Louise Riopelle, Anita McIlvin, Marie Iillquist, Helen N. Gillice, Rebekah Lockwood, Hazel I. Lewis, Katharine G. Dwyer, Emma Lange, Gertrude M. Stearns, Jenny Kleven, Mae S. Kinney, Dinah Tweed, Effie H. Felde, Ethel T. Garrett, Sigrid Romning, Janet Kippen, Carrie F. Mose, Drucilla Gubbins, Hazel F.

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A. C
Allie
M. F
Elea
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E. P
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Marg
A. O
Bren
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Chisholm. To U. S. Army General Hospital No. 18, Waynesville, N. C.: Alice B. Bardsley, Charlotte Lowe, Anna C. Merry, Gertrude M. Thurston, Reba E. Tucker, To U. S. Army Base Hospital, Camp Wheeler, Macon, Ga.: Katherine N. Curran, Carrie M. Campbell, Maude B. Setzer, Hazel B. Bragdon, Clara Winkler, Ruth L. Grey, Isabelle C. Harding, Arline E. Hall, Marion A. Chapman, Grace G. Burt, Ida B. Ault, Agnes A. Guile, Alta I. Griffin, Juanita Slauter, Jessie H. Whiting, Bessie B. Thomas, Marion Hance, Essie L. Rippey, Ruby A. Burgess, Helen W. Burgess, Mary M. Maher, Mary J. Dorey, Agatha S. Oberst, Catherine Franey, Kathleen McCoy, Alice McCoy, Effie Dailey, Elizabeth M. Holzlin, Mary I. Baughman, Mollie Miller, Viola Frederick, Glee Bowen, Emma Thomas, Christina L. Taylor, Ruth Tisdale. To U. S. Army Post Hospital, Wilbur Wright Field, Fairfield, Ohio: Leona Lauterbach. To U. S. Army Post Hospital, Fort Williams, Me.: Helen G. Mitson, Kate Toomey. To U. S. Army Camp Hospital, Camp John Wise, San Antonio, Tex.: Dora F. Carter, Totsie L. Little, Tapaz G. Heath. To U. S. Army Base Hospital No. 93 (service in Europe): Fee Kamensky, Mary F. Keller.

Transfers.—To U. S. Army General Hospital No. 19, Azalea, N. C.: Ruth R. Brown, Helen Butler, Anna M. Dutweiler, Esther M. Horde. To U. S. Army General Hospital, Fort Bayard, N. M.: Ida M. Franklin. To U. S. Army General Hospital No. 11, Cape May, N. J.: N. Lorene Daley. To U. S. Army Base Hospital, Camp Grant, Rockford, Ill.: Grace O. Deremiah, Opal R. Brackeen, L. Bella Prentice. To U. S. Army Base Hospital, Camp Jackson, Columbia, S. C.: Elizabeth A. Ford. To Department Hospital, Honolulu, H. T.: Hilda N. Berg. To U. S. Army Base Hospital, Camp Lee, Petersburg, Va.: Jennie McMaster, Rhoda V. Kelly, Rhoda A. Patterson, Jessie C. Foster. To U. S. Army Base Hospital, Camp Lewis, American Lake, Wash.: Estella M. Fryska. To U. S. Army Base Hospital, Camp Logan, Houston, Tex.: Florence E. Antrobus. To U. S. Army Embarkation Hospital, Camp Merritt, N. J.: Helen J. Field, Louise K. Sessler, Helen Falmgren. To U. S. Army Base Hospital, Camp Meade, Admiral, Md.: Hilda Pfefferkom. To U. S. Army Post Hospital, Plattsburg Barracks, N. Y.: Daphne W. Perkins. To Saint Mary's Hospital, Rochester, Minn.: Cecelia Loraine Holland, Anna Hager, Lois B. Standing, Ethel E. Jones, Mildred M. Boyle, Hazel G. Ward, Grace Imrie, Bertha A. Bernatz, Marie Johnson. To U. S. Army Base Hospital, Camp Sherman, Chillicothe, Ohio: Kathleen Hannon. To U. S. Army Post Hospital, Fort Snelling, Minn.: Serena H. W. Maas. To Walter Reed General Hospital, Takoma Park, D. C.: Tessie E. Lewis, Blanche H. Sheets. To U. S. Army General Hospital No. 18, Waynesville, N. C.: Estelle Matzen. To American Expeditionary Forces, Group B (service in Europe): Gladys E. Ryder, Rose M. Willems, Harriet Emery. To Nurses' Replacement Unit No. 1 (service in Europe): Pearl Hartsock, Elizabeth M. Bartlett, Beatrice Hunt, Bertha J. Bundy, Emma P. Durbin, Ellen Hughes, Agada A. C. Magnuson, Helen T. Regan, Lydia A. Jordan, Lucy D. Alfred, Delia Elwell, Margha V. Thomas, Sue Rainey, Stella E. M. Godard, Adelle M. Phillips, Hazel E. Middleton, Flora Portwine, Rebecca M. Paulson, Jane T. Taylor, Pearl E. Thom, Florence F. Canvas, Viola E. Cole, Jessica A. Davis, Nancy J. LeMasters, Frances A. Lindbloom, Rebecca Pons, Loretta M. Powers, Deborah B. Richter, Caroline L. Steinwart, Zella Stanton, Anna K. Weinstein, Mabell G. Wickland, Katie Abrams, Dessie B. Bellinger, Lucile Booton, Louise Botsai, Bertha V. Brown, Katherine C. Christianson, Irene M. Corbett, Hilda Cox, Elizabeth Finnegan, Doris M. Garrould, Daisy R. Giles, Margaret J. Graham, Florence M. Gray, Minnie Hanisch, Deldee Harry, Luella E. Helvey, Harriet M. Herr, Mary J. Herring, Frances E. Hogg, Plume M. Husby, Julis D. Loftus, Bianca P. Martinez, Eva Merryweather, Loretta M.

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J. Kea
Alma
Mary I

Ostrander, Emily Panhuysen, Christine Pfeifer, Anastasia Pfenning, Martha Schultz, Imelda B. Froman, Fannie A. Whitwell, Dora M. Arnert, Laura A. Baird, Martha J. Buck, Mary E. Colton, Cora M. Davis, Marjory J. DeRight, Christiana Enfield, Mary Emsley, Elsa E. Franke, Rebecca M. Glen, Margaret May Grube, Emma M. Guenther, Hilda B. Herd, Louise M. Holtkamp, Mary H. Horan, Frances J. Male, Grace G. Murphy, Bessie M. Milesell, Anna M. Murphy, Elsie C. Player, Elizabeth G. Quinby, Susan G. Rosenstiel, Ethel Wheeler, J. Alice Wilson, Frances T. Wright. To Replacement Unit No. 2 (service in Europe): Helen Bapty, Flora M. Burghdoff, Diana D. Dodds, Florence A. Foley, Bernadette M. Hamlin, Helen Hammar, Dena Henderson, Edith L. Jewell, Blanche M. Kirsh, Mary J. McGovern, Marguerite McKittrick, Anna Dee Donahue, Lilly M. Dow, Faye L. McAleer, Loretta G. Fern, Margaret L. Sinclair, Lillian Wiedemann, Anna M. Brewer, Mignonette I. Dunn, Charlotte I. Garton, Minnie Johnson, Elizabeth M. Mathewson, Julis R. Maley, Erminda J. Maggini, Anna J. Barnett, Edna Mae Beal, Mae Coltrun, Violet M. Headland, Mary B. Ogden, Ruth Patton, Dixie L. Perkins, Ethel Rahn, Marie Rasmussen, Florence Shinn, M. Anna Sontag, Gladys Sparrow, Bertha M. Beeman, Mary E. Blanchfield, Hallie W. Bryan, Anna M. Campbell, Anna E. Cussack, Bess Greenwalt, Mary M. Johnson, Elizabeth Kohten, Theresa M. Hohten, Harriet D. MacMillian, Ella M. McLeod, Maud P. Revell, Minta Reinhart, Bertha G. Smith, Esther V. Troeger, T. Madge Waters, Thelma Whidden, Frances L. Williams, Estella C. Agans, Kate I. Boles, Isabel Butler, Goldie E. Downs, Cecil A. Drenning, Ruth V. Gault, Mabel K. Landen, Estelle B. McCollins, Rose E. Michalski, Inez L. Smith, Cecile S. Stowe, Lucile M. Thomas, Marguerite Audell, Josephine Brown, Catherine L. Burke, Abbie E. Colby, Phoebe J. Detweiler, Laura M. Einspahr, Jane O. Creen, Lucy A. Hunderson, Anna M. Stover, Myrtle L. Rains, Ida B. Raphiel, Ida A. Netter, Alice Kinkade, Agnes Keenan. To Replacement Unit No. 3 (service in Europe): Elizabeth McGuinness, Mary McGuinness, Elsa A. Odman, Helen M. Sargent, Martha Hayward, Catherine McConaghy, Bessie A. Sheely, Kathryn J. Wolfgang, Stella Grogan, Lester M. Hancock, Lulu McMorris, Lucy May Osler, Belle K. Smith, Helen A. Snyder, Margaret E. Bagley, Florence P. Bosse, Dorothy P. Brown, Edith H. Charnley, R. Margrete Christopherson, Sevilla S. Denninger, Ethel M. Dobbins, Laura M. Hinderer, Ida May Keene, Hazel R. Kneeshaw, Gladys C. MacIntosh, Catherine E. McCabe, Florence M. Rutt, Mary Shelton, Achea A. Spaulding, Anna K. Steger, Emma Stenersen, Mary E. Thompson, Olga R. Anderson, Barbara Cox, Elizabeth Connolly, Margaret M. Freeman, Code C. Haslette, Elizabeth S. Lancaster, Blanche K. Lydikson, Alice Elaine Neilson, A. Florence Patterson, Lorna Polley, Lida G. Schmidt, Fay Scott, Florence E. Sexton, Florence E. Walton, Maybelle Wellum, Marie E. Wright, Teresa G. Cannon, Stella Bolstridge, Helen D. Fencil, Rhoda W. Halbert, Mary M. Hennessey, Besse G. Ruggler, Harriet Connelly, Clara A. Samples, Marion W. Sargent, Edith L. Vincent, Emma McK. Harris, Marie A. Ott, Mary M. Sunquist, Lillian A. Terstage, Myrtle V. Vaughn, Vivian Vaughan, Caroline W. Banghart, Winifred C. Duyer, Mary A. Kiernan, Gertrude Lautz, Agnes C. Mahon, Adalissa Mattson, Maud Yothers, Ruth Hopkins, Alma M. Lund, Laura A. Conley, Mary C. Freidhof, Rose Wilhelm, To Replacement Unit No. 4 (service in Europe): Adele M. Gurbe, Elsie B. Heidenreich, Mary M. Morgan, Katherine A. O'Grady, Mary L. Sauerbier, Karon Marie Schou, Ann E. Brady, Phoebe Allen, Eva E. Bowman, Anna K. Hansen, Stella S. Harryman, Laura E. Stoddard, Axah E. Cook, Mary F. Craig, Mary E. Farver, Mabel A. Gillan, Clara J. Keavy, Anna Wattman, Orpha B. Gould, Frances E. Gross, Laura M. Richards, Alma M. Simpson, Hazel E. Babcock, Helen E. Calkin, Elizabeth B. Donoghue, Mary K. Dimig, Delia B. Green, H. P. Halfpop, A. M. Holt, Ellen G. Jorstad, Cecelia

Josch, Esther O. Jorstad, Inez E. Millen, Ella N. Noring, Hattie Oberhauser, Hazel Z. Ogle, F. H. Paulson, Helen M. Reynolds, Selma M. Renneke, Agnes B. Renneke, Erma G. Riedel, Grace E. Scott, Emily G. Stewart, Anna Thomson, Emma E. Brown, Helen C. Brown, Cathlena A. Cooper, Felicita W. Hecht, Louise M. Henrich, Ellen E. Johnson, Wilma M. Johnson, Nina B. Johnson, Katherine K. Ovington, Shirley C. Sullivan, Jeannette F. Winter, Hattie Bruce, Charlotte L. Conrad, Ethel DeVries, Bessie J. DeLane, Anne E. Eichenberger, Anna C. Johnson, Harriet E. Little, Grace E. Marks, Louella M. Rose, Elizabeth C. Schan, Hazel Skouson, Rose E. Zorn, Louise Zorn, Mary K. Allen, Florence C. Garvey, Rita Z. Jacquain, E. Augusta Lamberger, Christine D. Martin, Justine C. Todd, Hazel O. DePuy, Constance Magunson, Laura A. Moline, Catherine M. Murphy, Otilia Nosckel, Alma K. Zeller. To Replacement Unit No. 5 (service in Europe): Julia E. Hoyne, Anna P. Parsons, Annie K. Thompson, Marion E. Lewis, Margaret McCallum, Martha G. Perry, Marie Cross, Ruth V. Ford, Lulabel Irwin, Josephine Irwin, Nelle M. Adams, Clara M. Bagent, Eleanor Dowling, Martha L. McVicker, Mary L. Willy, Jessie B. Akers, Martha Bell, Iva E. Terryman, Agnes M. Boyle, Estella M. Best, Rose M. Bruning, Inger M. Laland, Margaret R. Cronin, Anna Crosse, Agnes G. Donavan, Margaret S. Dewhurst, Gertrude C. Duchez, Elva B. Duckworth, Elsie V. Fink, Margaret M. Finnegan, Olga L. Frans, Lenora M. Gilley, Leah A. Gilliland, Nellie V. Jamieson, Georgia M. Judd, Anastasia A. Kenny, A. Ruth Lawrence, Mary E. Lazear, Clara Lee, Maude B. McConnell, Ita R. McDonnell, Elizabeth Maher, Cecilia J. Mans, Thora A. Moholt, Nellie Murphy, Valentine Melzark, Jennie A. Mace, Sara J. Nelson, Louise P. Overy, Sandra E. Peterson, Sue N. Scheidel, Margaret S. Smith, Ethel V. C. Smith, Flossie Jane Stahl, Catherine M. Underdown, Eloise Talbot, Charlotte M. Young, Caroline E. Berkemeyer, Katherine T. Watson, Edith May Mathews, Lieuthena H. Anderson, Gertrude E. Fortune, Ellen T. Gallagher, Edith C. Johnson, Myrtle H. E. Johnson, Kathryn A. McDonnell, Sarah F. McLane, Eula T. Slaughter, Swea E. Swenson, Ruby F. Cameron, Ruth Hibbert, Harriette L. Nolston, Lena F. Warrington, Edith D. Winter, Lillian V. Bennett, Margaret J. Boillet, Charlotte Ebbage, Evelyn Murgatroyd, Edith C. Christopherson. To Replacement Unit No. 6 (service in Europe): Grace M. Pickens, Elizabeth M. Johnson, Lois Mills, Margaret E. Bender, Marie E. Broker, Maude L. Dailey, Valentine M. Gontero, Weta Hawks, Esther L. Reinertson, Erma A. Rumberger, Anna M. Simonis, Clara E. Janett, Myrtle E. Luneau, Margaret E. Maddox, Lena Miller, Clara R. Parker, Ina Harold, Laura E. Stewart, Agnes M. Moran, Dora Broadus, Emma A. Dankhoff, Agnes C. Hogan, Florence T. Kelly, Marie C. Kane, Theresa M. O'Connor, Elsie E. Schneider, Mabel L. Sharp, Helen M. Z. Smith, Ivy M. Snyder, Isobel M. Boger, Dorothy M. Rome, Catherine A. Stockfleth, Mary F. Fitzgerald, Agnes G. Hall, Frances E. Harvey, Mary A. Keane, Margaret M. O'Leary, Ethel L. Smith, Violet M. Trefry, Alpha Louise Johnson, Anna M. Kreber, Anna M. Enderson, Ada T. Garvey, Anna S. Johnson, Susan B. Mitchell, Carolyn A. Moir, Hattie P. Rathjen, Frieda P. Schuetz, Mae McConville, Willa V. Berry, Celene Howe, Catherine Horgan, Grace E. Middlehoek, Louise M. Pitz, Dollie Vanthrin, Charity H. J. Haseltine, Carmelite O'Connor, Margaret A. Parchen, Hattie B. White, Carla L. Whitcomb, Ann L. Luthringer, Ella C. Anderson, Augusta S. Anderson, Emma C. Anderson, Anna B. Dale, Ragna L. Frederickson, Inga G. Grytdahl, Anna Hynding, Margaret J. Kelly, Hazel L. Murdock, Bertha M. Nelson, Cecelia M. Searle, Florence E. Waters, Helena Wolner. To U. S. Army Base Hospital No. 52 (service in Europe): Elsie M. Harrington. To U. S. Army Base Hospital No. 58 (service in Europe): Elizabeth V. Gabler. To U. S. Army Base Hospital No. 61 (service in Europe): Ruth G. Schoonever, Helen K. Johnston, Lucile V.

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Marga
Mary
Tighe
Joseph
Cather
Mary
M. An
Ruth
Garne
Mabel

Douglas, Emma G. Fuller. To U. S. Army Base Hospital No. 62 (service in Europe): K. Gertrude Allen, Dorothy E. Carter, Estelle N. DeMonthier, Beatrice A. Frasche, Nellie G. Galliher, Elisa Grunivik, Olive E. Hanna, Lucy J. Howatt, Rose Jahn, Gertrude Johnson, Henri T. Layton, Katherine B. McDermott, Agnes E. O'Connor, Harriet E. Oster, Dorothea J. Peterson, Elsie M. Hankin, Effie M. Rowe, Sue H. Rubincan, Dorine Aarrestad, Gerda K. Erling-Nielson, Millie A. Hollman, Daisy M. Wells, Mary J. Vogel, Una M. Toban, Elizabeth A. Diers, Bertha A. Fromm, Grace E. Hoffman, Jennie J. Hogan, Laura M. Wilson, Ethel H. Kangley, Eva E. Kelly, Katherine Kleinhenz, Ethel M. Steinman, Honor A. Barry, Elizabeth M. Harty, Mary R. Helstrom, S. Helene Hughes, Helen Laufer, Margaretha A. Lehman, Edna B. Merrill, Marion M. Brown, Jessie L. Hall, Carrie Roberts, Mae Brown, Mary E. Baldwin, Lettie V. Banker, Sophia E. Beck, Ethel Bly, Hannah B. Brown, Jessie Deweese, Roma J. Earnest, Mebel B. Farr, Esther J. Fish, Martha Fish, Martha Fuller, Florence Hanley, Jane May Hoff, Mamie E. Hornbeck, Hilma B. Johnson, Lillian F. Johnson, Rose J. Langenfeld, Gertrude Nolan, Helen P. Nolan, Alva R. Pederson, Isabel Rusker, Florence T. Selligren, Catherine F. Spence, Marion C. Sweeney, Mathilda Thompson, Margaret B. Wallace, Claribel West, Margaret B. Wilson, Helen Wipperman, Martha Krieger, Holma M. Oberg, Cora A. McKinley, Marguerite B. Major, Hilda M. Boyle, Emma C. Burtness, M. Audrie Davis, Ida Flemming, Harriet Johnston, Clara Kyrage, Anna J. Lochwood, Gertrude M. Monahan, Julia Marie Norrelund, Anna I. Shields, Gertrude M. Thompson, Kathryn C. Hopkins. To U. S. Army Base Hospital No. 63 (service in Europe): Grace Bramble, Ida M. Erickson, Bertha M. Erwan, Mary R. Groenier, Stella M. Hall, Mary L. Hawthoren, D. Ruth Hinton, Helen Lambert, Josephine D. Laurence, Antoinette Light, Blanche I. Mauer, Dorothy Nation, Margaret Pepper, Mary Vail Staples, Edith L. Stone, Mary E. Rothrock, Frances E. Brennan, Lucille Evans, Kathryn E. Fannin, Mary F. Malin, Mabel Shipley, Julia Skladany, Ella J. Vail, Rosetta Watts, Mabel V. Barker, Antoinette Bonnstetter, Ruth A. Franklin, Regina McIntyre, Cora G. Rackliffe, Agnes Rasmussen, Mary B. Robinson, Pauline Sandager, Sarah Smith, Lillian M. Boggs, Ruth Courtney, Mattie Hartfield, Emma J. LeGro, Phillippa Nelson, Lena Young, Mallie A. Parten, Esther C. Roach, Ethel E. Ross, Laura E. Tolander, Catherine L. Wev, Bessie E. Anderson, Clara J. Arne, Henrietta E. Brunt, Maude E. Canon, Mary N. Dobson, Eva Gordon, Nettie D. Irle, Arline Morris, Clara B. Olson, Hilda Plummer, Lillian B. Benner, Mary I. Andrews, Hannah G. Duggan, Elizabeth A. MacDermott, Ruby M. Nason, Elizabeth A. Cushing, Margaret H. Doherty, Theresa H. Donnelly, Omie Harris, Hazel Holmes, Mary C. Kelly, Edna P. Kimball, Mary R. MacDonald, Hilda D. Melching, Grace Newton, Mary E. O'Grady, Mary C. Ryan, Florence H. Scothorne, Elizabeth M. Smith, Eugenia M. Storms, Selma Swanson, Elizabeth M. Warren, Laura M. Williamson, Cecile A. Wiquist. To U. S. Army Base Hospital No. 93 (service in Europe): Lillian S. Edwards, Christine Madsen, Kathryn S. Paton, Mary J. Duff, Clara A. Mitchell, Margaret A. Quinn, Margaret M. Wheeler, Beda M. Bergstrom, Mary B. Ballard, Mary A. Fike, Pearl O. Hayes, Helen H. Kjelberg, Lillian A. LaVallee, Anna F. Tighe, Esther E. Wyatt, Alice P. Attride, Mary M. Bourgeois, Clara Bouwhuis, Josephine Burke, Clifford L. Burroughs, Ruth B. Dickerson, Eliza A. Emery, Catherine A. Gaffney, Bertha E. Hall, Frances T. Hanington, Minnie A. Haug, Mary E. Moore, Margaret M. Motherway, Mary A. Nolan, Cathleen Wilson, Ella M. Ambrose, Lela J. Cox, Della A. Killeen, Marietta Lee Pearce, Eva B. Martin, Ruth M. Walkup, Ethel Wallace, Ruth E. Anderson, Anna E. Flood, Margaret C. Garinody, Elizabeth Hayden, Shirley Hess, Sarah M. Holmes, Anne L. McNeill, Mabel L. McVey, Agnes R. Stevenson, Rubie E. Ward, Bertha A. Bate, Hannah

Brendt, Hilda I. Whidden, Bertha A. Burke, Gunhild Norlin, Eugenie M. Lehman, Mary E. Palsgrove, Luella L. Ross, Florence Wagner, Elizabeth M. Dickinson, Phyllis M. Turner, Lucille G. Almond, Grace E. Bassett, Maude L. Chase, Eleanor M. Fleming, Ellen V. Kerr, Hazel V. McCasland, Margaret Reilly, Mable G. Spear, Estelle Williams. To Psychiatric Replacement Unit No. 2 (service in Europe): Rachel Shanklin, Alma E. Reeves, Sarah Henderson, Anna C. Munn, Ella M. Williams, Lestha Wingett, Emily S. Boughton, Grace M. Cornell, Frances A. Haggerty, Elsa B. Killars, Helen T. Kennedy, Margaret M. Richardson, Mabel M. Stull, Phoebe Lou Parsons, Martha V. Smith, Catherine A. Doherty, Besse Mae McCann, Bessie Olive Goebel, Josephine L. Duffy, Miriam Urquhart.

Relief.—Reserve Nurses, Army Nurse Corps, relieved from active service in the military establishment: Eleanor L. Allen, Teresa C. Armstrong, Helen E. Barclay, Gladys Ballon, Ada C. Becker, Ruby M. Barribeau, Helen L. Bloomfield, Alida M. Boulander, Ruth Breitzka, Augusta Burg, Maude V. Clements, Edith B. Cole, Fredelia Dixon, E. Mae Dorrance, Maja Drogseth, Majorie H. Durkin, Charlotte Felder, Gertrude H. Fisher, Elsie Snyder Frey, Joanna M. Hewitt, Mabel R. Holmes, Helen May Hubacher, Pansy V. Jenkins, Helfried M. Jensen, Vera Ada Jones, Emma L. Kelly, Cecelia Kingston, Caroline H. Lathrop, Catherine Lenehan, Anna C. Lockerby, Leona McKee, Adah B. Mann, Margaret Martin, Bell M. Menzies, Winifred D. Merrihew, Lillian U. Miller, Julia A. Montgomery, Mary E. Morgan, Alice L. Morse, Mildred Mulets, Helen A. Nalty, Lieu J. Napier, Mary E. Palmer, Josephine Pfister, Sarah E. Phillippi, Ida Price, Mada Ratterree, Lina Reinhardt, Clara Reistroffer, Emily L. Roy, Wilma M. Sefton, Fannie A. Shrifrin, Margarite B. Sprague, Elizabeth M. Schmidt, Rebecca T. Steen, Anna St. Bennet, Ellen M. Stubkjaer, Mary A. Thorpe, Nora F. Swartz, Margaret M. Wheeler.

HONOR ROLL

Died in the Service of Their Country

Margaret Sullivan	September 17, 1918	United States
Ullie A. Stowe	September 21, 1918	United States
Mottie Good	September 25, 1918	United States
Anna E. Kemper	September 25, 1918	United States
Lillian M. Langdon	September 29, 1918	United States
Anna M. Murphy	September 28, 1918	United States
Mary Norton	September 28, 1918	United States
Phyllis M. Turner	September 28, 1918	United States
Lucy E. Jennings	September 30, 1918	United States
Lillian A. Aubert	October 6, 1918	United States

DORA E. THOMPSON,

Superintendent, Army Nurse Corps.

Under provision of the bill for the reorganization of the Army Nurse Corps, which became a law on July 9, Edith A. Mury, Lillian Aubert and Edith H. Rutley, Chief Nurses, Army Nurse Corps, were promoted to the grade of Assistant Superintendent, Army Nurse Corps, September 5, 1918, and assigned to duty in the office of the Surgeon General.

The many friends of Lillian A. Aubert, Assistant Superintendent of the Corps, will regret to learn, however, that she died of bronchopneumonia October 6, at Walter Reed General Hospital. Previous to her work in the office of the Surgeon General, Miss Aubert was Chief Nurse at Fort McPherson, Georgia. She was appointed to the Army Nurse Corps, December 14, 1912, and had an excellent

record. Her death is a great loss to the Corps, and will be keenly felt by all associated with her in her work.

DORA E. THOMPSON,
Superintendent, Army Nurse Corps.

Alabama.—THE NURSES' BOARD OF EXAMINATION AND REGISTRATION OF ALABAMA will hold an examination for the registration of nurses in Birmingham on November 15 and 16, in Montgomery on 18 and 19, in Mobile on 21 and 22. Application blanks can be secured from the secretary-treasurer, Helen MacLean, 2430 N. 11th Avenue, Birmingham, Ala. All applications and credentials must be filed with the secretary-treasurer at least fifteen days prior to the date set for the examination, or the candidate will not be allowed to write.

California: San Francisco.—THE SAN FRANCISCO COUNTY NURSES' ASSOCIATION held a "Drive" September 2-11, to raise funds to build a club house for nurses, a portion to be set aside for the use of nurses returning from the front invalided and unable to resume their former occupations. Nearly \$35,000 was raised, and donations are still coming in. The association was helped by the pupils of the San Francisco training schools, the Hospital Corps, Goat Island, U. S. N., nurses' aids and many others.

Illinois.—THE DEPARTMENT OF REGISTRATION AND EDUCATION will hold an examination for the registration of nurses, October 18 and 19. Application may be made to F. C. Dodds, Superintendent of Registration, State Capitol, Springfield, Ill. THE ILLINOIS STATE ASSOCIATION OF GRADUATE NURSES is making preparation for an interesting meeting in Chicago early in November. **Chicago.**—THE CHICAGO LYING-IN HOSPITAL and the Illinois Central Hospital, are employing nurses' aides, owing to the shortage of graduates. **Second District.**—AT A MEETING HELD IN JOLIET, September 7, Centralization of Schools of Nursing under the State was the subject of a very lively discussion. Training schools for attendants were also considered. Mrs. Agnes Loeffler Ruddick is now the public health nurse of Geneva and Batavia. **Seventh District.**—THE PEORIA RED CROSS CHAPTER has created a loan fund for Peoria nurses in Red Cross and military service. It will be administered by the local Nursing Service Committee and the money is to be used principally for the purchase of uniforms and equipment. Stella Freidinger has resumed her position as superintendent of the Proctor Hospital after a year's leave of absence attending Teachers College. Florence Nelson, Teachers College, 1918, has become the instructor at Proctor Hospital, and Ada Rupert, also of Teachers College, is the newly appointed surgical nurse. Martha Moritz, until recently the superintendent of Methodist Hospital, Peoria, has resigned to be married. Miss Moritz was a member of the first unit of nurses sent to Russia. She has been succeeded by Sara Horst, graduate of the Chicago Union Hospital. **Fifth District.**—AN EPIDEMIC OF TYPHOID, affecting over two hundred persons in Moline, in July and August, was checked by the splendid service of twelve Red Cross nurses employed by the Disaster Committee of the Relief Department of the local Red Cross Chapter, coöperating with the local Visiting Nurse Association and the Central Division of the Red Cross. This was an especially good piece of war work as it prevented the spread of infection to the Rock Island Arsenal where many troops are stationed. THE MOLINE PUBLIC HOSPITAL held graduation exercises for a class of four on the evening of October 7, at the Second Congregational Church. The class was addressed by Adda Eldredge, Interstate Secretary. A reception followed the exercises at the nurses' residence.

Indiana.—THE INDIANA STATE BOARD OF NURSE EXAMINERS conducted a

special examination for forty-seven applicants September 11 and 12. The regular examination for the registration of graduate nurses will be held in the State Capitol, November 20 and 21, 1918. Edna Humphrey, Secretary, 316 South Washington Street, Crawfordsville.

Massachusetts.—ON ACCOUNT OF THE EPIDEMIC, all arrangements for meetings of the State Association, League of Nursing Education and Private Duty Nurses' League have been cancelled, and dates for the Interstate Secretary throughout the state are indefinitely postponed. One notably good effect of the Survey of Nursing Resources of the state is the bringing into line of five hospital training schools and their being accepted by the State Association, and still others are on the way. All hospitals and homes employing nurses, all private hospitals, or special hospitals, whether training nurses or employing graduates, would do well to put themselves in communication with the corresponding secretary of the State Association. HELEN WOOD, superintendent of nurses, Massachusetts General Hospital, a graduate of that school, has been appointed a member of the State Board of Registration for Nurses by Governor McCall, in place of Mary E. Shields, whose term has expired and whose permanent address is in another state. **Framingham.**—THE GRADUATION OF CLASSES of 1917 and 1918 of the Framingham Hospital Training School for Nurses has again been indefinitely postponed on account of the prevailing conditions in stricken Massachusetts.

Michigan: Muskegon.—MARGARET J. ROBINSON, graduate of the Hackley Hospital, has been appointed by the French Commission of the American Red Cross in Paris, as a writer on hospitals and relief work, for the Commission. Miss Robinson has been superintendent of the Burlington and the Jefferson County Hospitals in Iowa and has been, recently, field editor for the *Modern Hospital*. **Calumet.**—THE COPPER COUNTY GRADUATE NURSES' ASSOCIATION (12th District) holds meetings on the second Saturday of each month, various hospitals or individuals acting as hostesses. The programme for the year includes parliamentary drill, letters from Red Cross nurses, addresses, papers and music.

Missouri: St. Joseph.—CHARLOTTE I. HAGLER has been made assistant superintendent of the Missouri Methodist Hospital.

New York.—THE NEW YORK STATE NURSES' ASSOCIATION has postponed its state meeting because of the widespread epidemic of influenza. The meetings will be held on December 3-5, in Rochester, at the Powers Hotel. The meetings on the 3rd will be devoted to the interests of the League and of the public health nurses, particularly. **Troy.**—LOUISE F. ARNOLD, superintendent of the Samaritan Hospital, has taken charge of the Army School of Nursing at Camp Upton, Long Island.

North Carolina.—THE BOARD OF EXAMINERS OF TRAINED NURSES OF NORTH CAROLINA will meet in Asheville, Tuesday, November 12, at the Langren Hotel. Mary Julia Lebby, Secretary and Treasurer.

North Dakota.—THE NORTH DAKOTA STATE BOARD OF NURSE EXAMINERS will hold an examination of applicants for registered nurses in Fargo, November 5 and 6, Tuesday and Wednesday, 1918. For further information address M. Clark, Secretary-treasurer, Devil's Lake General Hospital, Devil's Lake.

Pennsylvania.—THE PENNSYLVANIA STATE BOARD OF EXAMINERS FOR REGISTRATION OF NURSES has removed to Room 1206, Otis Building, Philadelphia.

Rhode Island: Providence.—THE EPIDEMIC OF INFLUENZA has been very severe. Two members of Base Hospital Unit No. 4 were ill when the Unit sailed and were obliged to stay behind, Miss Hodgson and Miss Deery.

Tennessee.—THE TENNESSEE STATE ASSOCIATION held its annual meeting at Knoxville on October 7 and 8. Sarah E. Sly, chairman of the Committee on Revision of the American Nurses' Association was present to advise regarding the reorganization. The meeting was held under adverse circumstances because of the epidemic of influenza, the attendance being small. It was decided to create a fourth district, with Chattanooga as a center. The following officers were elected: President, Margaret L. Greener, Knoxville; vice presidents, Nina L. Wooten, Nashville, Miss Scribner, Memphis; secretary, Miss Ocree, Nashville; treasurer, Miss Irby, Knoxville. Chairman of committees are: Ways and Means, Miss McInnis, Memphis; Nominating, Miss Sprouts, Nashville; Publicity, Miss Barnes, Nashville; Relief Fund, Miss Plewes, Chattanooga; Revision, Miss Hatchcock, Knoxville; Arrangements, a member from Memphis, not yet selected. The members appreciated the help and advice of Miss Sly, who visited Chattanooga and Nashville to confer with the members in those places, before returning home.

Wisconsin.—THE WISCONSIN STATE ASSOCIATION OF GRADUATE NURSES held its ninth annual meeting at the Nurses' Club, 566 Van Buren Street, Milwaukee, October 1-2. A short memorial service was held for Alice Ashby, who died on the evening of September 28, of pneumonia. The opening morning was given over to round tables and discussions on Red Cross nursing, public health nursing, school nursing, private duty nursing, and superintendents of training schools. In the absence of Miss Sly, reorganization problems were discussed by Mathild Krueger of Neenah. A telegram received Tuesday morning stated that Miss Olmstead was unable to come because of influenza; her place was filled by Captain Hutchinson of the British Commission, who told of what the women of England were doing to help win this war. Miss Upham's talk in the evening, on Occupation Therapy, was most interesting and greatly enjoyed by all present.

BIRTHS

On September 19, a son, Arthur Eugene, Jr., to Mr. and Mrs. Arthur Eugene Weber of Clarion, Iowa. Mrs. Weber was Agnes P. McCleery, class of 1909, West Side Hospital, Chicago.

On August 27, at Russell Private Hospital, Brewer, Maine, a daughter, Virginia, to Mr. and Mrs. Caleb H. Weston. Mrs. Weston was Marie P. Ouilette, class of 1914, Sisters of Charity Hospital, Waterville, Maine.

MARRIAGES

On June 13, at City Point, Va., N. Virginia Moran, class of 1914, Martha Jefferson Hospital, Charlottesville, to Preston B. Coiner. Mr. and Mrs. Coiner will live in City Point.

On June 12, in Manila, P. I., Mary Valeria Bulsford, class of 1911, St. Christopher's Hospital, Philadelphia, and class of 1915, Allentown Hospital, Allentown, Pa., to Lieutenant Charles Donald Maclean, U. S. A. Lieutenant and Mrs. Maclean will live in Fort William McKinley, Rizal, P. I.

On August 10, at Jersey City, N. J., Martha E. Smith, class of 1917, Truesdale Training School, Fall River, Mass., to William C. Crassley. Miss Smith served as an Army nurse at one of the Base Hospitals until her marriage. Mr. and Mrs. Crassley will live in Fall River.

On June 13, Violet Jensen, class of 1907, Hahnemann Hospital, Chicago, to Alva E. McReynolds. Captain McReynolds is stationed at Camp Bowie, Texas.

Mrs. McReynolds will continue in her position as superintendent of the Blue Mound Tuberculosis Sanitarium, Wauwatosa, Wis.

Recently, Hazel Smith, class of 1910, Hahnemann Hospital, Chicago, to George Thorensen of Manila.

On August 31, Theresa Hinch, graduate of the Silver Cross Hospital, Joliet, Ill., to Lieutenant Clare Davidson.

On July 11, Hattye Kraft, graduate of the Silver Cross Hospital, Joliet, Ill., to Harlow Palmer.

Recently, Rose Mueller, graduate of Sherman Hospital, Elgin, Ill., to R. E. Brown. Mrs. Brown will continue in her position as surgical nurse of the Sherman Hospital.

DEATHS

On October 1, at Loomis, N. Y., after a long illness with tuberculosis, Luria Burnett.

On September 7, in France, after an illness of five days with pneumonia, Frances M. Moeschler, class of 1915, Lenox Hill Hospital, New York City. She was buried with military honors. Miss Moeschler had sterling qualities, a high sense of patriotism and devotion to duty; she was popular with all. She gave all she could, her life to her country.

On September 30, at Edgewood, Maryland, after an illness of a few days, Lillian Langdon, class of 1910, State Hospital, Scranton, Pa. Miss Langdon was in active Red Cross service at the time of her death. She had been a most faithful nurse since her graduation and her associates feel deep sorrow in her death.

On October 9, at Camp Gordon, Georgia, Lillian F. Cupp, class of 1918, Rochester Homeopathic Hospital, Rochester, N. Y.

On October 12, at the Hahnemann Hospital, Rochester, N. Y., Rhoda B. Tilford, a pupil nurse.

DEATHS RESULTING FROM INFLUENZA

On October 5, at the Rhode Island Hospital, Providence, R. I., Vesta Brewer and Minnie Nystrom, pupil nurses.

On October 8, at the Rhode Island Hospital, Providence, R. I., Bertha Kelly, pupil nurse.

On October 7, at her home, Providence, R. I., Ruth Matilda Wilson, pupil nurse of the Rhode Island Hospital.

On October 4, at Fordham Hospital, New York City, Nellie J. Potter, a pupil nurse from Butler Hospital, Providence, R. I.

On September 13, at the Naval Hospital, Chelsea, Mass., Maria Elisia Trimble, class of 1904, Butler Hospital, Providence, R. I. Miss Trimble was sent to Chelsea in May and contracted the disease in the performance of her duties. She was a fine woman and a devoted nurse, always ready to do her part in work for the advancement of her profession.

On September 18, at the Naval Hospital, Chelsea, Mass., Constance Martin, Class of 1914, Rhode Island Hospital, Providence, R. I. Miss Martin had done both district work and private nursing; she was a good nurse, popular among her friends and classmates.

Recently, at the U. S. Naval Base Hospital, Philadelphia, Marie L. Hidell, class of 1902, Reading Hospital, Reading, Pa. Miss Hidell had once served at St. Thomas' Hospital, Ancon, Panama, but had been in the Naval Hospital since last spring. She had worked very hard during the epidemic of Spanish influenza, caring for the sailors who were ill. She was buried with military honors. Miss Hidell is greatly missed, for she was held in high esteem by all who knew her.

On September 28, at the Milwaukee Hospital, Milwaukee, Wis., after an illness of five days, Alice Ashby. At the time of her death, Miss Ashby was serving as registrar and manager of the Milwaukee County Nurses' Club. She was one of the early graduates of the Indianapolis City Hospital Training School and later became superintendent of this school to which she gave several years of devoted service. She was an early member of the National League of Nursing Education and spent the greater part of her professional life in training school work. Miss Ashby was an unusual woman and superior nurse, standing always for progress and high ideals. Those who have known her feel that the nursing profession has lost a noble character and a loyal friend. It may be said that because of her great reserve, only those who lived nearest to Miss Ashby could truly appreciate her wonderful character and lovable qualities, and to those who have known and loved her for so many years, her death comes as a great sorrow and inestimable loss. But to those who knew her great dread of lingering illness and dependence on others, there comes a feeling of great thankfulness that the end came as she wished, quickly and peacefully in the midst of a busy life.

On September 22, in France, in the service of her country, Magdalene Volland, class of 1916, Buffalo Hospital, Sisters of Charity, Buffalo, N. Y.

On October 8, at the Newport Naval Hospital, Newport, R. I., of spinal meningitis, following influenza, Mildred A. Metcalf.

On October 20, at Chicago, Ill., Mrs. Frederick Tice, graduate of the Illinois Training School, after an illness of three days. A further notice will appear next month.

BOOK REVIEWS

IN CHARGE OF

GRACE H. CAMERON, R.N.

THE HOSPITAL AS A SOCIAL AGENT IN THE COMMUNITY. By Lucy C. Catlin, R. N. W. B. Saunders Company, Philadelphia. Price, \$1.25.

Miss Catlin in her preface to this splendid and much needed book, expresses her hope that "the hospital may be made an important social agent in the community;" and that the volume may "present a practical working basis in establishing and maintaining hospital social service." In a clear, concise and forceful way the reader is informed of the need for this comparatively new department in hospital work. The hospital is an established and indispensable feature of every community. Social service develops the hospital's value and increases its usefulness as a social agent. "It places the hospital in the forefront as an important asset in the welfare of the community and of the state." The author lays stress upon the important service this organization may render to the individual, to the community and to society. The book is interesting and attractive with concrete examples of work accomplished; illustrations of actual conditions, and instructive facsimiles of records and blanks used. Miss Catlin is a nurse of many years' experience and therefore is the better fitted to give this useful guide for the establishing of social service departments in connection with hospital work.

NURSING IN DISEASES OF CHILDREN. By Carl G. Leo-Wolf, M.D. C. V. Mosby Company, St. Louis. Price \$2.50.

The nursing of children is one of the very important divisions of a nurse's training, the care differs so widely from the care of an adult. Clinical demonstration and lectures are the usual method of instruction, yet lesser subjects demand a text-book for actual study. Teachers and pupils will welcome this simple text book on the nursing care of children because the subject matter is simply stated, without excessive detail and unnecessary diagnostic descriptions. The arrangement is good and the "quiz" at the end of each chapter is an aid to study and memory. The chapters on Public Health Nursing by Mrs. A. L. Hansen, R.N., of Buffalo, N. Y., and on Mental Hygiene by H. G. Matzinger, M.D., add to the instructive value of the book. The text is illustrated.

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Committee on Nursing of the General Medical Board of the Council of National Defense.—Chairman, M. Adelaide Nutting, R.N., Teachers College, New York City. Secretary, Ella Phillips Crandall, R.N., Council of National Defense, Washington, D. C.

The American Journal of Nursing Company.—President, Clara D. Noyes, R.N., The American Red Cross, Washington, D. C. Secretary, Minnie H. Ahrens, R.N., 915 Lakeside Place, Chicago, Ill. Editor and Business Manager, Sophia F. Palmer, R.N., 45 South Union Street, Rochester, N. Y.

The American Nurses' Association.—President, Clara D. Noyes, R.N., 1726 M. Street, N.W., Washington, D.C. Secretary, Katharine DeWitt, R.N., 45 South Union Street, Rochester, N. Y. Treasurer, Mrs. C. V. Twiss, R.N., 419 West 144th Street, New York, N. Y. Interstate Secretary, Adda Eldredge, R.N., 45 South Union Street, Rochester, N. Y. Biennial convention to be held in 1920 in Atlanta, Georgia. Sections: Private Duty, Chairman, Frances M. Ott, R.N., Morocco, Indiana; Mental Hygiene, Chairman, Elnora Thomson, R.N., Hull House, Chicago; Legislation, Chairman, Anna C. Jammé, R.N., State Board of Health, Sacramento, Calif.; Committee on Revision, Chairman, Sarah E. Sly, R.N., Birmingham, Mich.

The National League of Nursing Education.—President, S. Lillian Clayton, R.N., Philadelphia General Hospital, Philadelphia, Pa. Secretary, Laura R. Logan, R.N., Cincinnati General Hospital, Cincinnati, Ohio. Treasurer, M. Helena McMillan, R.N., Presbyterian Hospital, Chicago, Ill. Annual meeting to be held in 1919 in Chicago.

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